CHAPTER-3

FEMALE FOETICIDE: SOCIAL MYTH AND MINDSET OF PEOPLE
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The problem of female foeticide has received little attention. The female foetus is readily sacrificed on the altar of expediency, individual convenience and legal technicalities. Ease access to the techniques of sex determination has given rise to female foeticide. In many countries, modern techniques of ultrasound scans and unuterio-sex testing which are basically designed to make pregnancy safer are ironically being abused for female foeticide. Millions of female fetuses are aborted creating a serious sex imbalance to give rise to other social problems in India and a few other South Asian countries. A study reveals that in a year around 6 million abortions took place out of which only a few thousand are legal. A survey carried out in Bombay during 1984 revealed that out of 8,000 abortions, 7999 were of female fetuses. In a much quoted study carried out in Maharashta it is revealed that a Bombay clinic which performed 8,000 operations, 7,999 of which are girls. In South Korea 20,000 females are aborted every year. The same is true with China and several other third world countries.

This gruesome act often goes unnoticed and unreported. So there can be no direct evidence to establish the existence of this inhuman act. However there are some indicators which lead us to a positive conclusion about the existence of this practice. One of the basic indicators is the male-female Sex Ratio. Sex ratio is defined as the number of females per 1000 males. The sex ratio of Indian population has always

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2 Shaleo Nigam: Legal News and Views: July 2000 (Struggle for Survival : Issues in the Sex Determination and Female Foeticide)
been of topical interest for the demographers, social scientists, women’s groups research scholars and various planners and policy makers. Global population has increased threefold during the century from 2 billion to 6 billion, the population of India has increased nearly five times from 23 million (23 crores) to one billion in same period\(^3\). The question is when population increases why is that India has such an uneven composition of population (inconsistency in sex-ratio) compared to most of the developed countries in the world?\(^4\)

### 3.1 Indicators of Female Foeticide

The U.N. Statistical Office and Populations division points out that sex ratios in India seems to suggest that it is an exception to the global rule that girls have a better survival rate than boys, since they are biologically stronger. The sex ratio at the International level is an average of 1050 females for every 1000 males. In India the sex ratio has steadily been declining over the years with the last census showing a sex ratio of 945 women to 1000 men. This indicates a significantly high number of “missing women”. “Missing women” denotes the difference between the expected and actual number of living females. The table-1 shows the sex ratio as per the census in last eleven decades.

A preliminary look at the census data of 2001 reveals a severe scenario of the worsening situation. The sex ratio in the country had always remained in favorable to females. The sex ratio of the child population (0-6) years has declined by 18 points at the national level for 945 in 1991 to 927 in 2004. In fact all states and union territories except Kerala, Tripura and Mizoram have reported fewer girls then boys, less than six years. The decline is most pronounced in Punjab, where the sex ratio in this age group(0-6 years), fell from 875 in 1991 to 793 (a decrease of 82 points) the

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\(^4\)For Medical Termination of Pregnancy Rules: 1972-Sec G.S.R. 286 dt. 19.02.07 Gazetteer of India 11.03.1972, part II,S.3(i) p.708
shocking declines are also witnessed in Haryana (59 points), in Himachal Pradesh and Chandigarh (54 points), followed by Uttaranchal (42 points) Goa (31 points) and Maharashtra (29 points). In fact these declines are in areas which had already been flagged as showing low sex ratios among children and as regions which were having a rapid growth of sex determination clinics and questionable abortions, with a highly likelihood of female foeticides. Surprisingly, even Maharashtra, the first state that have banned the pre-natal sex determination tests, has registered a decline in the under-6 sex ratio, from 946 in 1991 to 917 in 2001 (a decrease of 29 points). Female foeticide has been attributed as one the main factors of this phenomenon. The 1991

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of female for 1000 males</th>
</tr>
</thead>
<tbody>
<tr>
<td>1901</td>
<td>972</td>
</tr>
<tr>
<td>1911</td>
<td>964</td>
</tr>
<tr>
<td>1921</td>
<td>955</td>
</tr>
<tr>
<td>1931</td>
<td>950</td>
</tr>
<tr>
<td>1941</td>
<td>945</td>
</tr>
<tr>
<td>1951</td>
<td>946</td>
</tr>
<tr>
<td>1961</td>
<td>941</td>
</tr>
<tr>
<td>1971</td>
<td>930</td>
</tr>
<tr>
<td>1981</td>
<td>934</td>
</tr>
<tr>
<td>1991</td>
<td>927</td>
</tr>
<tr>
<td>2001</td>
<td>945</td>
</tr>
</tbody>
</table>

Source: Registrar General of India, Reported in Health Statistic of India; Central Bureau of Health Intelligence, Ministry of Health and Family Welfare, Govt. of India, New Delhi.

census shows an alarmingly low sex ratio of less than 900 females to 1000 males in 54 districts of the country spread over to seven states as shown in table-2.

Table 2:

<table>
<thead>
<tr>
<th>State</th>
<th>No. of districts with low child sex ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haryana</td>
<td>All 20 districts</td>
</tr>
<tr>
<td>Punjab</td>
<td>All 18 districts</td>
</tr>
<tr>
<td>Rajasthan</td>
<td>7 out of 27 districts</td>
</tr>
<tr>
<td>Uttar Pradesh</td>
<td>10 out of 63 districts</td>
</tr>
<tr>
<td>Gujarat</td>
<td>4 out of 19 districts</td>
</tr>
<tr>
<td>Madhya Pradesh</td>
<td>4 out of 45 districts</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>1 out 21 districts</td>
</tr>
</tbody>
</table>

Source: www.censusindia.net

The sharp decline in the female sex-ratios of certain districts, co-incidental with reports of female infanticide and foeticide in these districts suggest that the reasons are more likely to be infanticide or foeticide. According to the Indian medical Association, for instance, five million female fetuses are aborted every year. Keeping in view the seriousness of the problem, the National Human Rights Commission (NHRC, India) has asked the Medical Council of India to examine the ethical aspects of sex determination tests which it too acknowledges are causing a high rate of female foeticide. Child right to be born. Most of the incidents will not come to light as it is done in strict secrecy and with the involvement of the parents, and other relatives. The clinics which conduct the foeticide will also keep it secret on account of

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6 Sheela R.C. and Athreya, "Female Infanticide in T.N. Some Enlace", EPW of India Vol. 33 No.7, April 26 1997

7 Singh S.C. “Pre-Natal Diagnostic and Female Foeticide”, Supreme Court Journal Vol. 3.2001
commercial reasons. Therefore no ready statistics are available on this subject. There has been no national census of “At Birth Sex Ratios” nationwide.

So no official data is available for identifying the gravity of the problem. However, certain independent micro level surveys have been conducted by different Non-Government Organizations. These surveys are mostly region wise, area-wise or even localized. But, the results of these studies reveal that the number of females born in several areas is in a great degree less than the number of males. As the same situation is revealed by various studies in different parts of the country the problem of female foeticide assumes a “National Character”. The sex ratio indicated in the Table-3 has relevance to show that there is a gap between the expected rate of female births and actual births of females in the absence of an ‘at-birth sex ratio’. This gap and the results of various studies as mentioned indicates that abortion of female foetus are taking place in large number in India.

The National Law School of India University, Bangalore has conducted an extensive study on this topic through their centre for Child and the Law and data complied by the University with the help of available data from Government and Non-Governmental Agencies provides a serious insight into the gravity of the problem. A study conducted by Dr. M.K. Premi into the sharp decline of female sex ratio shows the possibility of large-scale female foeticide. It is summed up in the table-3.

The sex-ratio at birth which is reflected in this study is interesting because it seems to contradict the probability of an equal number of girls being born as there are boys. This trend is unfortunately not restricted to the particular study above but has become a common phenomenon.

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Table-3
Sex Ratio at Birth and children Alive (0-6 years) in Madhya Pradesh

<table>
<thead>
<tr>
<th></th>
<th>Total reported births</th>
<th>Born alive</th>
<th>Now alive</th>
<th>Sex-Ratio at birth</th>
<th>Sex-Ratio of live birth</th>
<th>Sex Ratio of existing children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>166</td>
<td>151</td>
<td>136</td>
<td>1000</td>
<td>1000</td>
<td>1000</td>
</tr>
<tr>
<td>Female</td>
<td>139</td>
<td>117</td>
<td>68</td>
<td>837</td>
<td>775</td>
<td>500</td>
</tr>
</tbody>
</table>

Source:- NLSIU : Bangalore

Table-4
Sex Ratio of males per 100 females (1981 to 1988)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Males per 100 females</td>
<td>105</td>
<td>105</td>
<td>113</td>
<td>113</td>
<td>113</td>
<td>112</td>
<td>114</td>
<td>122</td>
</tr>
</tbody>
</table>

Source:- NLSIU : Bangalore

A study conducted by Mr. R.P. Ravindra, during 1998 in Ludhiana to calculate the secondary sex-ratio(SSR), which is defined as the number of males born per hundred females as shown in table-4.

These ratios are definitely indicative of sex-selective abortion of females, particularly towards the late 90’s when sex determination tests became more popular. A similar study was conducted in Kanyambadi block in Tamil Nadu were it was notice that in 1997 the male ratio at birth was 923:826. Accordingly to a study by the Morrison Institute for population and Research Studies at Stanford University, the

9NLSIU. Female Infanticide & Foeticide: A legal perspective-Published by Centre for Child and Law NLSIU Bangalore
Secondary Sex Ratio for India is 108.7 males per 100 females. A sample study conducted in rural Haryana, illustrative the point that female foeticide distorts the male-female ratio. It is found out that though there exist a growing disparity between the number of boys and the number of girls with the boys significantly outnumbering the girls, if the number of aborted female fetuses is added to the number of female infants, the ratio is in favour of the females. Thus there are several ‘missing’ female children in India. The special studies on the ‘Declining Sex Ratio’ and the problem of Female Infanticide sponsored in 1993 by the moral Department of Woman and Child Development, New Delhi had revealed that while the practice of female foeticide is a common phenomenon in urban areas the problem of female infanticide is a localized phenomenon limited only to certain communities in the states of Tamil Nadu, Bihar, Gujarat, Punjab, Haryana, M.P. and Rajasthan10.

Table-5 shows a distorted sex profile; believed to be the result of abortion of female fetuses in the community. The hypothesis seems to be correct, because upon adding the number of aborted female fetuses to the number of existing females the sex-ratio tilts in favour of females as it should be have under normal circumstances as shown in table -6.

**Table 5**

| Age-Sex Profile of the child Population (0-5 years) in Rural Haryana11 |
|-----------------------------|-----------------------------|
| Male                        | Female                     |
| 0-1 Age category 15         | 0-5 category 94             |
| Female 10                   | 65                         |
| Female-Male Ratio 667       | 691                        |

Source: NLSIUU Bangalore

While female infanticide continues to be practiced in communities across India, the development of technology for the pre-natal determination of sex of the child has become immensely popular. It provides an easy way out from the moral dilemma of having to kill 'a living being', to the more affluent families who can now detect the sex of the foetus, and abort all unwanted girls. Thus urban areas show a wider gap in the sex-ratio of children at birth than in the sex-ratio of living children, indicating that girls are eliminated while still in their mother's womb, rather than being killed after birth. Discrimination starts even before birth in the form of sex determination tests misusing the high technology of amniocentesis, resulting in a new kind of foetocide, i.e. abortion of female fetuses. On the other hand, sex ratios among rural communities show a greater gap between those of children alive, as also a greater gap in the sex specific (infant mortality rate) IMR. Researchers say that the spreading of female foeticide among the so-called educated class has worked to legitimize female infanticide among the poorer communities. Recent studies have revealed that, in South Asia, we have inherited the cultural legacy of strong son-preference among all communities, religious group and citizens of varied socio-economic backgrounds. Patri-locality, patri-lineage and patriarchal attitudes manifest in, women and girls having subordinate position in the family, discrimination in property rights and low paid or unpaid jobs. Women's work of cooking, cleaning and

### Table-6

<table>
<thead>
<tr>
<th></th>
<th>0-1 Age category</th>
<th>0-5 category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>15</td>
<td>94</td>
</tr>
<tr>
<td>Female</td>
<td>17</td>
<td>93</td>
</tr>
<tr>
<td>Female-Male Ratio</td>
<td>1133</td>
<td>989</td>
</tr>
</tbody>
</table>

Source: NLSIU Bangalore
In many communities female babies are killed immediately after birth either by her mother or by elderly women of the households to relieve themselves from the life of humiliation, rejection and suffering. In the most prosperous state of Punjab, the conventional patriarchal preference of male children leads to thousands of cases of sex selective abortions. Recently a man drowned and killed his 7-years old daughter and also tried to kill his wife for having borne him the girl child. According to the Chandigarh (Punjab) based Institute for Development and Communication, during 2002-2003 every ninth household in the state acknowledge sex selective abortion with the help of ante-natal sex determination tests. This researcher also found empirical study conducted by him during the year 2005-2008 in Punjab and Haryana. The most of the family aware about the sex selective methods and do accordingly, as they desired the son more preferable than girl-child. In history, female infanticide is common among certain castes and tribes such as the Rajputs, Jats, Gujars, Ahirs and Sikhs. It was a custom widely accepted among these warrior tribes, where sons were 'needed' to defend the honor and more important the territories of the tribe. Added to that there were other social causes that lead to female infanticide. The most important of these was the fact that rivalries and strict hierarchy between clans restricted the marriageable clans to which women could be given. Dowries and marriage expenditures proved to be another burden on the families of the girls. On the other hand, raising unmarried daughters was considered disgraceful. Thus female infanticide provided an easy way to get rid of the girl child who was considered an unmitigated burden. Consequent upon the advances in medical science, the

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termination of unwanted children especially female foetus through abortion has become common in families to satisfy their preference for sons. Studies indicate that there is preference for sons in South Korea, Pakistan, India, Turkey, Mexico, Taiwan and China. In India, often the alibi is offered that families prefer boys to girls just because according to them boys provide security to the aged parents\textsuperscript{13}.

Some people think, a girl means accumulation of sufficient resources for the dowry the parents have to give away, when the girl gets married. Therefore, the parents think that the girl is a financial burden for them, whereas the boy is an asset who fetches a fabulous dowry for the parents. In India socio-economic background has been the village behind the tragic female foeticide. Certain communities want to get rid of female child compelled by the circumstances of dehumanizing poverty, unemployment, superstition and illiteracy. The concept of ‘Vanshodharak’ a male child to perform last rites in Hindus and carry forward Measures to Reduce Female Foeticide.

According to Prof. Ramesh Chandra the practice of two evils viz. female foeticide and female infanticide is mainly due to the strong preference for son and as such, these are responsible to a large extend for the ever-declining sex-ratio. A misuse of the modern technique of Amniocentesis for sex determination is an added dimension to this problem\textsuperscript{14}. Prof. Ramesh Chandra has given some important reasons for the uneven composition of population and the sex ration. They are listed below:

\begin{itemize}
  \item[a)] Neglect of the girl-child resulting in their higher morality at younger ages;
  \item[b)] High maternal morality;
  \item[c)] Sex-selective female abortions;
  \item[d)] Female infanticide;
\end{itemize}

\textsuperscript{13}www.datamatonfoundation.org
\textsuperscript{14}Ramesh Chandra, Women and Child Development, p. 123 New Delhi
e) Change in sex ratio at birth\textsuperscript{15}.

According to Ram Ahuja in his article Population dynamics the reasons has described for sex imbalance are: female infanticide, neglect of female infants, early marriage, death consequent on child birth, bad treatment, and hard work of women. The researcher also conducted a survey to look into the problem and interacted with almost 400 to 800 people, at different points of time spread in two states Punjab and Haryana and covering about 38 districts and about 80 villages including some town and metros cities of India and has drawn the following conclusion.

1. There is a general preference among the people especially in the North and Western India in favour of male children. The presence is comparatively less in South India except in the state of Tamil Nadu. The spread of male preference is larger in the Northern Indian while it is lesser in South. Another aspect is that those who expressed against the male preference were still greater in South. The researcher attributes the education, progressive social outlook, economic development also not provide the freedom by the women in Punjab and Haryana and the cultural differences as factors responsible for the wide gap in the opinions.

2. The people are aware of the existence and spread of the problem in the society. But there is no proper enlightenment among them. Many people approach this issue so lightly without knowing that killing a foetus is as gruesome as killing a new born.

3. There are social and economic factors contributing to the commission of this crime. However, in the modern times the economic factor plays the major role.

### Table 7
Preference for male child in various States as brought out in survey (% of preference)

<table>
<thead>
<tr>
<th>States</th>
<th>Preference for male child (Percentage wise)</th>
<th>Index of Son preference</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Andhra Pradesh</td>
<td>25</td>
<td>70</td>
<td>13.8</td>
</tr>
<tr>
<td>Bihar</td>
<td>82</td>
<td>8</td>
<td>24.5</td>
</tr>
<tr>
<td>Maharashtra</td>
<td>51</td>
<td>17</td>
<td>18</td>
</tr>
<tr>
<td>Delhi</td>
<td>66</td>
<td>12</td>
<td>13.3</td>
</tr>
<tr>
<td>Haryana</td>
<td>63</td>
<td>13</td>
<td>14.3</td>
</tr>
<tr>
<td>Goa</td>
<td>18</td>
<td>78</td>
<td>24</td>
</tr>
<tr>
<td>Gujarat</td>
<td>59</td>
<td>38</td>
<td>23</td>
</tr>
<tr>
<td>Karnataka</td>
<td>20</td>
<td>74</td>
<td>20</td>
</tr>
<tr>
<td>Kerela</td>
<td>15</td>
<td>82</td>
<td>11.7</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>38</td>
<td>58</td>
<td>9.2</td>
</tr>
<tr>
<td>Utter Pradesh</td>
<td>70</td>
<td>25</td>
<td>21.6</td>
</tr>
<tr>
<td>Madhya Pradesh</td>
<td>69</td>
<td>27</td>
<td>27.1</td>
</tr>
<tr>
<td>Orissa</td>
<td>59</td>
<td>38</td>
<td>23.4</td>
</tr>
<tr>
<td>Punjab</td>
<td>20</td>
<td>74</td>
<td>20.3</td>
</tr>
<tr>
<td>Rajasthan</td>
<td>82</td>
<td>8</td>
<td>25</td>
</tr>
<tr>
<td>West Bangal</td>
<td>63</td>
<td>13</td>
<td>14.3</td>
</tr>
</tbody>
</table>


4. With the liberalization of economy and globalization of market and habits, a new consumer culture has invaded Indian Societies at all levels and it has added to the menace.

5. As against the common belief that the women, especially the ‘mother’ is a passive participant in this act due to the pressure from relatives and husbands, it is found in the survey that they too are active participants and quite often, they take the lead and initiative.

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17. Ibid
6. About 80-90 percent of the total abortions taking place in India are female foeticides.

7. In areas where the female infanticides have been in practice, female foeticide has become a substitute method. The main factor for this shift in techniques are (i) convenience, (ii) easy method of execution, (iii) element of secrecy, (iv) comparatively less cost, (v) easy accessibility, (vi) lesser trauma attached to the act and (vii) comparatively lower chances of being booked by law.

8. Though the existing law is strict and provides for a larger number of safeguards its implementation has not been effective\textsuperscript{18}.

9. The problem shall not be viewed in isolation and must be viewed as part of the larger atrocities against women and as an issue involving her human rights to take birth and to live as human being.

The problem of female foeticide has a social background, which would bring out the disparity in the myth and reality on womanhood in Indian Society. On one hand the woman is glorified as the symbol of ‘Sakhti’ and all sorts of prosperity\textsuperscript{19}. She is worshiped as goddesses. On the other hand, she is subjected to all sorts of atrocities and her very existence as a woman is threatened. She is considered as a burden in the society. She is denied even the basic necessities of life. The female gender is oppressed at every walk of life. It would be interesting to trace the history of the practice of female foeticide in this background.

In the most recent census publication the census commissioner hints that 477 districts consisting of over 82% of the districts register an increase in sex ratio of the population in the age group seven plus. These 215 districts have recorded substantial

\textsuperscript{18} Ibid
\textsuperscript{19} Census of India 2001, Paper 1 Supplement: 56 Department of Public Relations. Government of India.
gain of twenty points. The possibility of some positive impact on the enumeration of
adult female population in many parts of the country during the current census due to
various factors such as gender sensitive approach in training and publicity measures
also can not be ruled out. Majority of the districts recording gains of above 20 points is
from Uttar Pradesh, Uttarakhand, Bihar, Rajasthan, Assam, Madhya Pradesh, Tamil
Nadu, and Arunachal Pradesh. It is noteworthy to mention that all the districts of
Uttarakhand, West Bengal, Jharkhand, Andaman and Nicobar Islands show an
improvement in the sex ratio age seven plus at the Census of India, 2001 as compared
to the 1991 Census. Among these nine districts of Arunachal Pradesh, seven districts
of Uttarakhand and four districts of Uttar Pradesh have recorded an increase of 50 or
more points in the sex ratio age seven plus.

One can argue that if the 2001 Census has been more gender sensitive than
before, there should have been an improvement in the child sex ratio as well but this
has not happened. It seems that a real decline in the child sex ratio must have wiped
out the gains of better enumeration of the girl child. There is convincing evidence in
the district wise analysis of 2001 Census data that the decline in the child sex ratio is
all pervasive and has occurred throughout India while it is more pronounced in
Punjab, Haryana, parts of Himachal Pradesh and Gujarat apart from cities like
Chandigarh, Delhi, Surat, Mumbai, Kolkata, etc.

Census paper no. 1 Supplement provides comparable data for 1991 and 2001
on child sex ratio in 577 districts of India [this excludes 14 districts of Jammu and
Kashmir where the 1991 Census was not conducted and Kutch District of Gujarat and
Kinnair District of Himachal Pradesh where the 2001 Census was not conducted in
February]. As many as 456 districts out of 577 records a decline in the child sex ratio
in 2001 compared to 1991. In 70 districts, the decline is in the order of 50 points. In
several districts, the decline is more than 100 points Regardless of the quality of
Census enumeration in the Census as of 1991 and 2001; one can conclude that the decline in the child sex ratio is real phenomenon and not a statistical aberration\textsuperscript{20}.

The Female-Male Ratio (FMR) in India, which had been showing an overall decline from 1901 onwards, revealed a marginal increase in the 2001 Census. Paradoxically, this improvement in the overall sex ratio was accompanied by a decreased in the sex ratio of the 0-6 year’s age groups. The implications of this are disturbing; it means that discrimination against the female child has increased in India over the last decade. This has increased the concern about, and the need to tackle the issues of female foeticide and infanticide.

Foeticide is the practice in which the sex of the foetus is determined with the help of ultrasound, scans and in-vitro sex testing and the foetus is killed through abortion. Female foeticide is, when with the help of medical technology, the sex of the foetus is determined and, it found to be female, aborted. It is also called sex-selective abortion\textsuperscript{21}.

There are several ways to determine the sex of the child in the womb itself. These are amniocentesis, ultra-sonogram and chorion villa. These are safe, medical technologies which are mainly used to detect any genetic anomalies. In recent years, all these tests have become synonymous with sex determination tests in India. A commonly held view is that people who are rich and educated do not indulge in practices like female foeticide. The paradox of the situation is that the incidence of female foeticide is confined to the affluent and highly educated sections of our society\textsuperscript{22}. It has gained popularity among the urban, educated middle classes. The poor, illiterate and rural people of India are still aware such dimensions of medical technology which threaten the very right of a girl child to live. The gravity of the

\textsuperscript{20} Census paper I, Supplement 53
\textsuperscript{21} Supra n.19
situation can be estimated by the news that according to the Campaign against Female Foeticide (CAFF), 90 per cent of the estimated 3.5 million abortions in India each year are to eliminate girls.

Modern science has been accused of introducing the modern practice of female foeticide after the sex determination test. But ancient India appears to have been quite familiar with the practice of abortion. The first reference to abortion is seen in the Atharya Veda as early as 2000-8000 B.C. Chandrashekar notes in the text Brihadyogalarinigini, though to be written around the first century B.C.23, ‘Several contraceptive recipes are given including a method for the occlusion of the cervix’. This suggests the existence of the practice of abortion then too. Interestingly the three Sanskrit medical classics, written respectively by Susruta, Charaka and Vaghbata I, which comprise the main body of knowledge of ancient Hindu medicine, deal with abortion and miscarriage amongst other reproductive issues. He further observes that almost all ancient Hindu writers and law givers, including manu, dealt with the subject, often at length. This indicates more than a sporadic existence of the practice over 4,000 years.24 The 17th century work of Acharya Lolinbaraj, a well-known Ayurvedic physician of his time, provides the means of tackling an unwanted pregnancy when used with caution. The elaborate and extensive treatment of the topic by the ancient writers probes the mind of the reasons for prevalence of such practices then.

While practices of infanticide and foeticide are widely prevalent, its acceptance by the people who are committing it is denied. There are several indicators that can prove its existence. The most important indicators are primary and secondary sex ratio at the time of conception where secondary sex ratio is a sex ratio

at the time of birth. ‘there is a misconception that the primary sex ratio or sex ratio at the time of conception would be roughly balanced, i.e. fifty-fifty chance of either a boy or a girl’\textsuperscript{25}. On the contrary, most findings indicate a high (preponderance of males) pre-natal sex ratio. This preponderance of males reduced gradually throughout gestation. Miller concludes that scholars assume that female embryos are harder than the male, which more often abort suddenly. The fact that the female fetuses are destroyed in a larger number is substantiated by more number. Perhaps due to larger size, the male suffers greater stress. The above findings are highly speculative as the study of primary sex ratio is at a very crude level of development\textsuperscript{26}. The secondary sex ratio or sex ratio at birth shows that males tend to slightly outnumber females at birth. The higher rate of still-born males and higher death rate of male infants in the first year of life evens out things. Indeed by age one, the proportion of the sexes is equal in the West. From the above observations it is apparent that nature has its own way of balancing sexes in a short time from conception to age one. The variation in the sex ratio later on life is more clearly regulated by the cultural constructs that define which will be the ‘superior’ sex in terms of survival. The deviation from the normal will indicate sex-selective abortion. Certain surveys conducted in states like Madhya Pradesh, Punjab and Haryana indicate that the number of females born in several areas is a great degree less than the number of males, indicating the abortion of female fetuses. A study conducted in Ludhiana in Punjab tried to find out the secondary sex ratio (SSR) which is defined as the number of males born for hundred females. The following were the results as shown in table-8.

The data shows that over the period 1981 to 1988, the number of males born to every hundred females in gradually increasing. Similar are the findings of scholar

\textsuperscript{26} Supra n.23 p.121
in his study of Madhya Pradesh. His data shows that in 1998, 151 males were born alive as compared to 117 females born alive. These evidences prove the prevalence of female foeticide in Madhya Pradesh27.

Recent statistics of female-male sex ratio of 793 females to 1,000 males in Punjab are very alarming. The scourge of foetus killing has become so deadly that there are no brides in scores of villages in the region (as shown in table 9). Still girls continue to disappear in the notorious ‘Kuri Mar’ (girl-killer) region of Malwa. The threateningly skewed ratio has brought together the gurudwaras, the government and the women to fight this age-old, barbaric practice to save its girls now. In the light of the earlier discussion that female fetuses have more chances of survival than male.

Table 9

<table>
<thead>
<tr>
<th>Towns</th>
<th>Fatehgarh Sahib</th>
<th>Bhatinda</th>
<th>Mansa</th>
<th>Sangrur</th>
</tr>
</thead>
<tbody>
<tr>
<td>Females</td>
<td>28,147</td>
<td>63,738</td>
<td>41,395</td>
<td>112,358</td>
</tr>
<tr>
<td>Males</td>
<td>37,312</td>
<td>81,773</td>
<td>53,117</td>
<td>143,227</td>
</tr>
<tr>
<td>Sex Ratio</td>
<td>754</td>
<td>779</td>
<td>779</td>
<td>784</td>
</tr>
</tbody>
</table>

Source: Sharma, Shradhha 2006

27Ibid
The substantial increase in the number of male births is a good indicator of sex-selective abortion of females, particularly in the latter part of the 1980s, when sex determination tests were becoming very popular. Infanticide and foeticide are the acts which have been institutionalized and have social approval. They are deliberate efforts to exterminate female babies as early as possible in their life. Those who do not have a heart to kill their daughters, neglect them. Neglecting a baby is far from killing one, but it can shorten a child’s life and the traumatic experience can leave a permanent scar. Neglect along with child abuse, if carried too far, can be fatal. ‘Child abuse is an act done to harm the child whereas in the case of neglect, harm comes to the child because something is not done which should have been. Neglect has been rarely discussed as an expression of discrimination or a form of infanticide. But it has included conscious and unconscious neglect as a form of infanticide along with homicide and malign aggression. Unlike other forms of infanticide, aggression or neglect may not always be fatal.

The sex ratio is known to be a manifestation of the relationship between biological and social factors. Ceteris paribus the female male ratio (FMR) should about 1020-1070:1000 and in fact in many developed as well as in developing countries, the sex ratios are in favour of the female29. For example in the USA it is 1058, Japan 1034, Burma 1016 and Ethiopia 1066. In India however, there has been a decline in the female male ratio (FMR) till 1991 though the female life expectancy has increasing over time. However the female male ratio was marginally higher in the 2001 census than in 1991 as shown in table-10 though it continues to be on the lower side. Unfortunately, the census data also reveals a decreasing sex ratio in the age group 0-4 years and 0-6 years.

One of the causes of low sex ratio in childhood i.e. infanticide, has been widely recognized over the years\(^{30}\). However, the recent phenomenon of the

### Table 10

**Trends in Sex ratio in India, 1901-2001**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FMR</td>
<td>971</td>
<td>955</td>
<td>950</td>
<td>945</td>
<td>946</td>
<td>941</td>
<td>931</td>
<td>935</td>
<td>927</td>
<td>933</td>
</tr>
<tr>
<td>0-6 years</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>976</td>
<td>964</td>
<td>962</td>
<td>945</td>
<td>927</td>
</tr>
<tr>
<td>0-4 years</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>990</td>
<td>980</td>
<td>972</td>
<td></td>
</tr>
</tbody>
</table>


increasingly sharp decrease in 0-4/0-6 years age sex ratios is believed to be the result of the increased use of ultrasound and amniocentesis for sex determination followed by sex selective abortion\(^{31}\). An important question is whether this falling sex ratio in the 0-4/0-6 year group in everywhere throughout Indian or restricted to those states, known to have a high anti-female bias.

Till recently it was believed that states in the north and west Punjab, Haryana, Gujarat, Madhya Pradesh, Rajasthan, Utter Pradesh and Bihar, showed clear anti-female intervention, while those in the east and south like Kerala, Andhra Pradesh, Assam, Orissa and Karnataka, did not show this anti-female bias. These differences in demographic structures had been identified in literature, with an economic, social and


cultural divide between the north and the south of India. It was believed that this divide was responsible for the difference in status amongst the women of these areas. However, as we see in table-11, the present evidence seems to indicate that regardless of the North South divide, the phenomenon of selective female elimination has spread across much of the country, though it intensity varies across states. Thus, while previously, as a general rule of thumb, states in the east and south tended to have a 0-6 female child ratios (FMRs) more than 960-980, today a phenomenon termed 'northernisation of sex ratio' is prevalent. In fact, it has shown that form 1901 onwards, there has been a general shift of districts with higher sex ratios to the lower sex groups. The scholars have used reverse survival methods to estimate sex ratio in several parts of India. According to them the disappearance of endogamy in the South and the universalisation of dowry are to a large extent responsible for this shift.

Table-11 also reveals that the prevalence of decreasing 0-6 years age sex ratio, is not necessarily linked to the overall economic development of the state. Except for Kerala where both the FMR and the 0-6 sex ratio increased in the 2001 Census, and for Gujarat, Punjab and Haryana where both have fallen, for all other states, while FMR has increased, the 0-6 ratios are seen to have fallen. There is in fact, more evidence from all over the country that with increasing affluence, female infanticide is being transformed into female foeticide. For example, data from 2001 Census

---

Table-11
Trends in Female Male Ratio (FMR) and 0-6 Year Sex Ratios in Selected States of India

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>Punjab*</td>
<td>917</td>
<td>908</td>
<td>882</td>
<td>874</td>
<td>892</td>
<td>908</td>
<td>875</td>
<td>793</td>
</tr>
<tr>
<td></td>
<td>Rajasthan</td>
<td>911</td>
<td>919</td>
<td>910</td>
<td>922</td>
<td>931</td>
<td>954</td>
<td>916</td>
<td>909</td>
</tr>
<tr>
<td></td>
<td>Uttar Pradesh</td>
<td>876</td>
<td>862</td>
<td>876</td>
<td>898</td>
<td>899</td>
<td>935</td>
<td>928</td>
<td>916</td>
</tr>
<tr>
<td></td>
<td>Haryana</td>
<td>867</td>
<td>870</td>
<td>865</td>
<td>861</td>
<td>911</td>
<td>902</td>
<td>879</td>
<td>820</td>
</tr>
<tr>
<td>South</td>
<td>Andhra Pradesh</td>
<td>977</td>
<td>975</td>
<td>972</td>
<td>978</td>
<td>986</td>
<td>992</td>
<td>974</td>
<td>964</td>
</tr>
<tr>
<td></td>
<td>Karnataka</td>
<td>957</td>
<td>963</td>
<td>960</td>
<td>964</td>
<td>968</td>
<td>975</td>
<td>960</td>
<td>950</td>
</tr>
<tr>
<td></td>
<td>Tamil Nadu</td>
<td>978</td>
<td>977</td>
<td>974</td>
<td>986</td>
<td>964</td>
<td>967</td>
<td>974</td>
<td>939</td>
</tr>
<tr>
<td></td>
<td>Kerala</td>
<td>1016</td>
<td>1032</td>
<td>1036</td>
<td>1058</td>
<td>972</td>
<td>970</td>
<td>958</td>
<td>962</td>
</tr>
<tr>
<td>West</td>
<td>Gujarat</td>
<td>934</td>
<td>942</td>
<td>934</td>
<td>919</td>
<td>956</td>
<td>947</td>
<td>928</td>
<td>878</td>
</tr>
<tr>
<td></td>
<td>Madhya Pradesh</td>
<td>920</td>
<td>921</td>
<td>912</td>
<td>920</td>
<td>944</td>
<td>978</td>
<td>952</td>
<td>931</td>
</tr>
<tr>
<td>East</td>
<td>Bihar</td>
<td>957</td>
<td>948</td>
<td>907</td>
<td>921</td>
<td>958</td>
<td>981</td>
<td>959</td>
<td>938</td>
</tr>
<tr>
<td></td>
<td>Orissa</td>
<td>988</td>
<td>981</td>
<td>971</td>
<td>972</td>
<td>984</td>
<td>995</td>
<td>967</td>
<td>950</td>
</tr>
<tr>
<td></td>
<td>West Bengal</td>
<td>891</td>
<td>911</td>
<td>917</td>
<td>934</td>
<td>1007</td>
<td>981</td>
<td>967</td>
<td>963</td>
</tr>
<tr>
<td></td>
<td>India</td>
<td>931</td>
<td>935</td>
<td>927</td>
<td>933</td>
<td>954</td>
<td>962</td>
<td>945</td>
<td>927</td>
</tr>
</tbody>
</table>

Source: Census 2001 Paper I, Banerjee and Jain 2001

also reveals that the overall urban 0-6 child sex ratio (CSR) has been 903 while the over all rural 0-6 CSR is 934. This seems to indicate a greater discrimination in the urban/richer areas. We also know that while the 0-6 CSR has been below 900 for all districts of Delhi, it is the lowest-845 in south-west Delhi which is one of the most prosperous districts of Delhi. Since urban health especially, amongst better-off sections, is known to be better than rural health across sexes, this fall in CSR in the more affluent areas, cannot be taken to mean a higher mortality in the rich. In fact, in view of the concentration of medical services in the urban as compared to the rural

37 Census 2001 Paper I, Banerjee and Jain 2001
areas, it is most probable that this decreasing Child Sex ratio (CSR), is indicative of increasing sex-selective abortion. Similarly, data from the 55 round of National Sample Survey Organization (NSSO) 1999-2000 very for women in the poorest families and most unfavourable for the richest households in both urban and rural areas as in table-12.

This once again is indicative of increasing sex-selective abortions in the richer families. Further work done using the 43, 50, 52 & 55 rounds of NSSO reveals a more consistent trend of declining sex ratios with prosperity especially with later rounds. It is important that we further examine and investigate such information. It is essential to understand why better-off families have less female-male ratios than the poor family. It seems that women’s secondary status has significant implications for their health, well-being and survival.

<table>
<thead>
<tr>
<th>Area</th>
<th>MPCE 0-14 Years</th>
<th>FMR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural 0-225</td>
<td>946</td>
<td>1004</td>
</tr>
<tr>
<td>&gt;950</td>
<td>804</td>
<td>858</td>
</tr>
<tr>
<td>Urban 0-330</td>
<td>903</td>
<td>949</td>
</tr>
<tr>
<td>&gt;1925</td>
<td>819</td>
<td>836</td>
</tr>
</tbody>
</table>


The present worsening in 0-4 /0-6 years sex ratio includes not only an increase in female foeticide but also an increase in female mortality during infancy as well as in childhood as compared to male mortality.

Table-13 reveals that the increase in female infant mortality as compared to male infant mortality began from the 1970s. It is noteworthy that not only is infant mortality in females greater than that of males, death rates are also higher in females as compared to males in the 0-4 years age group. An examination of the percentage contribution of deaths during 0-1 years, as well as 1-4 years of age by sex, over time reveals differences in trends of male and female mortality as in table-14. There is for the 0-1 years age group, a slow though sustained decline in male mortality. On the other hand infant female mortality reveals an initial fall followed by

Table 13
Infanticide and Child Death Rates (0-4 years) by Gender

<table>
<thead>
<tr>
<th>Year</th>
<th>Infant mortality rate</th>
<th>0-4 years death rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>1905</td>
<td>231</td>
<td>218</td>
</tr>
<tr>
<td>1936</td>
<td>170</td>
<td>153</td>
</tr>
<tr>
<td>1955</td>
<td>99</td>
<td>91</td>
</tr>
<tr>
<td>1964</td>
<td>76</td>
<td>72</td>
</tr>
<tr>
<td>1972</td>
<td>132</td>
<td>148</td>
</tr>
<tr>
<td>1984</td>
<td>104</td>
<td>148</td>
</tr>
<tr>
<td>1993</td>
<td>73</td>
<td>75</td>
</tr>
<tr>
<td>1999</td>
<td>71</td>
<td>73</td>
</tr>
</tbody>
</table>


a marginal increase. Similarly, there is an increase in proportion of female deaths in the age group from 1-4 years, while male mortality for the same age has decreased over time.

This is significant since if all other things remain equal, the greater biological weakness of the male as compared to the female should lead to an excess male mortality during infancy as well as during childhood. It is only during the reproductive period, where reproduction is an additional risk factor, that female mortality may be expected to increase over male mortality. Thus this higher mortality of girls as compared to boys, during infancy as well as in the first four years of life is indicative of social discrimination in the neo-natal as well as in the post neo-natal period. This would mean situations of not only infanticide but also neglect leading to higher mortality of the female child. Another question that comes to mind is- what are the reason by these girls dying of? Table-15 shows that mortality due to many of the communicable diseases is higher among girls than boys despite their greater biological strength, and in fact the gap seems to be widening with time. Additionally, there are more deaths among girls due to anemia-an indicator of malnutrition amongst girls in these age groups. This seems to indicate that a lower social status of girls-

Table -14
Per cent of Total Infant and Child Mortality (1-4 Years), 1970-1998

<table>
<thead>
<tr>
<th>Year</th>
<th>0-1 years</th>
<th>0-4 years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>1970</td>
<td>54</td>
<td>46</td>
</tr>
<tr>
<td>1980</td>
<td>55</td>
<td>45</td>
</tr>
<tr>
<td>1990</td>
<td>55</td>
<td>45</td>
</tr>
<tr>
<td>1998</td>
<td>53</td>
<td>47</td>
</tr>
</tbody>
</table>


especially in a situation of poverty is reflected in discriminatory nutritional and health care practices. This could lead to an increased mortality.

It is social discrimination—often in the presence of poverty—against female in the 0-4 years age groups, that is contributing to the decreasing child sex ratio. Therefore, while it need to tackle the issues of foeticide and infanticide. It also needs to consider all the other causes for child mortality while planning strategies for improving the under-six sex ratios.

Table-15
Per Cent of total Mortality in 1-4 Years by Selected Diseases

<table>
<thead>
<tr>
<th>Year</th>
<th>1980</th>
<th>1990</th>
<th>1998</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>Respiratory</td>
<td>11.6</td>
<td>12.3</td>
<td>12.1</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>9.5</td>
<td>10.4</td>
<td>11.6</td>
</tr>
<tr>
<td>TB</td>
<td>0.4</td>
<td>0.31</td>
<td>0.8</td>
</tr>
<tr>
<td>Malaria</td>
<td>0.9</td>
<td>0.9</td>
<td>0.9</td>
</tr>
<tr>
<td>Measles</td>
<td>0.9</td>
<td>1.3</td>
<td>0.5</td>
</tr>
<tr>
<td>Anaemia</td>
<td>1.5</td>
<td>3.4</td>
<td>3.3</td>
</tr>
<tr>
<td>total</td>
<td>22.4</td>
<td>25.21</td>
<td>25.9</td>
</tr>
</tbody>
</table>

Notes: 1. Respiratory include: Influenza, Pneumonia Whopping Cough.
2. Gastrointestinal includes: Cholera, Typhoid, Acute Abdomen Dysentery and Gastroenteritis.

However, it is also significant that while all India Female Male Ratio (FMR) is better than the 0-6 years sex ratio, some states as dissimilar as Madhya Pradesh, West Bengal, Jharkhand, Uttar Pradesh, and Bihar—to name a few—have better sex ratios for the group in the 0-6 years than overall sex ratio as shown in table-16. These

42Id at p.130
higher 0-6 sex ratios with lower FMR are indicative of the fact that having survived till the age of six years, these girls die at an older age. This is significant as it reveals the fact that while female foeticide and infanticide are no doubt extremely important; the bias against

**Table 16**

Female Male Ratio and 0-6 year Sex Ratios in Selected States, 2001

<table>
<thead>
<tr>
<th>State</th>
<th>FMR</th>
<th>0-6 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Madhya Pradesh</td>
<td>920</td>
<td>931</td>
</tr>
<tr>
<td>West Bengal</td>
<td>934</td>
<td>963</td>
</tr>
<tr>
<td>Jharkhand</td>
<td>941</td>
<td>966</td>
</tr>
<tr>
<td>Uttar Pradesh</td>
<td>899</td>
<td>916</td>
</tr>
<tr>
<td>Bihar</td>
<td>921</td>
<td>938</td>
</tr>
</tbody>
</table>


**Table 17**

Per cent of Reported Deaths (excluding Senility) by Age and Sex, 1998

<table>
<thead>
<tr>
<th>Age groups in year</th>
<th>Male 1998</th>
<th>Female 1998</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 1 year</td>
<td>14.1</td>
<td>16.3</td>
</tr>
<tr>
<td>1-4</td>
<td>3.8</td>
<td>5.8</td>
</tr>
<tr>
<td>5-14</td>
<td>4.2</td>
<td>5.3</td>
</tr>
<tr>
<td>Total</td>
<td>22.1</td>
<td>27.4</td>
</tr>
<tr>
<td>15-24</td>
<td>4.9</td>
<td>6.6</td>
</tr>
<tr>
<td>25-34</td>
<td>6.6</td>
<td>7.1</td>
</tr>
<tr>
<td>35-44</td>
<td>8.2</td>
<td>6.4</td>
</tr>
<tr>
<td>Total</td>
<td>19.8</td>
<td>20.1</td>
</tr>
<tr>
<td>45-49</td>
<td>16.5</td>
<td>11.1</td>
</tr>
<tr>
<td>60+</td>
<td>41.6</td>
<td>41.4</td>
</tr>
<tr>
<td>Total</td>
<td>58.1</td>
<td>52.5</td>
</tr>
</tbody>
</table>


---

older women is no less significant as shown in table-17. In fact table-18 reveals how little progress (or even go back), we have made in eliminating communicable diseases as a cause of death from 1984 to 1998(for girls 5-14 years in this case). Thus, while sex-selective abortion may be increasing among the well-off, in poorer families, a number of older girls would be bound to be continuing to die due to poor nutrition as well as decreased access to health care.

In this context it is useful to point out that the overall percentage of mortality among girls in the 5-14 years of age vs. overall mortality among females has increased from 48 per cent to 50 per cent, although the percentage of female mortality by total mortality in other age groups has decreased. Also, overall female mortality

Table 18
Per cent of Mortality for Age 5-14 years by Sex, 1984 and 1998

<table>
<thead>
<tr>
<th>Selected Communicable Disease</th>
<th>1984</th>
<th>1998</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Respiratory</td>
<td>11.0</td>
<td>15.3</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>21.5</td>
<td>19.2</td>
</tr>
<tr>
<td>Anaemia</td>
<td>2.3</td>
<td>2.1</td>
</tr>
</tbody>
</table>

Notes:- 1. Respiratory include: Influenza, Pneumonia Whopping Cough.
2. Gastrointestinal includes: Cholera, Typhoid, Acute Abdomen Dysentery and Gastroenteritis.

as a percentage of total mortality has decreased from 46 per cent to 43 per cent while male mortality has increased commensurately. In other words, mortality has increased for girls in the age group till 14 years as compared to boys. Thus the girls who are not eliminated in childhood have to pay a heavy price. Higher female morbidity and mortality (despite higher male biological weakness), discrimination in allocation of food, in education and subjection to gender violence are the lot of toward the
women. While there is no doubt that female foeticide/infanticide is a crime, we cannot ignore the question of higher female mortality in childhood that is again due to the twin demons of poverty and discrimination against the girls child. We have already seen through mortality data by age as shown in table-18 that not only is mortality for girls more than for boys at ages 1-4 years, mortality is more for females till the age of 35 years as compared to that for males. This clearly indicates that girls who survive foeticide and infanticide may still persist due to inequitable access to food or medical care. The end result for them thus stays the same, and it is there too that we need to focus our energies.

Therefore, while the decrease in the 0-6 years sex ratio is generating a lot of discussion today, the issue of higher female mortality in later life that is also due to gender bias likewise needs to receive special attention. The quality of life of these girls till they die as juveniles or in womanhood is linked to the same issue that is responsible for the low sex ratios viz. their low social status. A question we therefore need to ask ourselves is, whether attempting to prevent female foeticide and female infanticide is sufficient, or would we need to improve women’s overall status in order to improve sex ratios?

The following issues have drawn up by this data:

i) While the sex ratio has been decreasing for almost a century, it is only recently that the FMR has shown a marginal improvement. However this has been accompanied by a fall in the 0-6 and 0-4 age child sex ratio. This is indicative of a high probability of increasing female foeticide and female infanticide.

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46Ibid
Interestingly while there is a 'northernisation' of the southern states in this phenomenon, another observation is that this bias also seems to be more among the rich urban groups as compared to the poorer rural population.

While mortality rates are higher for girls than boys during infancy, this higher mortality is seen to persist till the girl is fifteen years of age. Finally, even if girls survive beyond the age of fifteen years, they often still continue to be socially in danger and have higher mortality than boys and men.

3.2 Census Commission and Female Foeticide

"The Decline in child sex ratio is assuming an alarming proportion in certain districts of Punjab, Haryana, Himachal Pradesh and the decline in majority of the districts in other states and union territories across the country [Uttar Pradesh, Madhya Pradesh, Chatisgarh, Orisa, Karnataka, Assam, Delhi, etc] is rather intriguing. The social cultural bias against the girl child might have been possibly aggravated by recent medical support in terms of sex determination tests and requires further field investigation"47.

Literacy ratio is calculated in the Indian Census since 1991 for the age group seven plus. Therefore the 0-6 age group population is subtracted from the total population. For a proper study of the child sex ratio, one needs data on sex ratio at birth and at ages one, two, three, four and five but single year age data are not very reliable. Data present figures for the 0-4 and 5-9 age groups. These data have to be analyzed both for 1991 and 2001.

The most comprehensive study of juvenile sex ratio [JSR] for the age group 0-9 years was done by Satish Agnihotri (2000); based on 1961 and 1981 Census data. His book Sex Ratio Patterns in the Indian Population: A Fresh Exploration gives a valuable insight into this complex phenomenon. Commenting on sex selective

47Supra n.26
abortions and the female infanticide, Agnihotri says; “The rise in sex selective abortions and emergency of female infanticide in various parts of the country and two serious aspects of excess child mortality48.

Agnihotri brings out the close linkage between female foeticide and female infanticide. He argues; “Prenatal selection is a new technological tool which has gained acceptability as something scientific, natural and performed by the ‘professionals’ concerned. It has accorded legitimacy to the elimination of child on the basis of its sex. Where money and facility are available, it is resorted to buy the social super stratum. Those who do not have the access to this facility look for ‘affordable’ alternatives since the process has been ‘sanctified anyway. This ‘affordable’ alternative is infanticide. As the incidence of infanticide spreads, those who practice the infanticides occupy of ‘pedestal holder’. After all, they are not resorting to the ‘barbaric’ or the ‘cruel’ practice of killing a new born infant. So the doctor who goes around the countryside with this ‘mobile facility’ in this new luxury car can claim to be doing social service. The verdict is now passed not on whether the elimination on the basis of sex is acceptable or otherwise but on which method is more acceptable-sex-selective abortion or infanticide. The technological alternative gets legitimized in comparison with infanticide while sanctifying the idea of elimination of the child on the basis of sex. This in turn spreads the practice of infanticide further among those who do not have access to the facility, e.g. high castes in rural Bihar, or those who cannot afford it, e.g. rural poor in Salem district in Tamil Nadu. Notwithstanding the spread in the ‘facilities’ for prenatal selection, it will continue to remain beyond the reach of a large number of people in foreseeable future. The two processes will therefore, feed on each other49.

48 Supra n.31
49 Supra n.41
The registrar general has published data for all the 593 districts of India (census paper 1 Supplement 2001). In Table 19, the distribution of the districts according to the range of sex ratio for 0-6 population and in Table 20, comparable data for the seven plus population, for 577 districts for which comparable dates for 1991 and 2001 are given. The districts are classified into sex categories: (Child Sex Ratio) (A) 1,000-1,049 (B) 950-999 (C) 900-949 (D1)850-899 (D2) 800-849; and (D3) Less than 800.

Table -19

<table>
<thead>
<tr>
<th>Sex Ratio (0-6)</th>
<th>1991</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of Districts</td>
<td>Population (Million)</td>
</tr>
<tr>
<td>1000-1049</td>
<td>21</td>
<td>8.67</td>
</tr>
<tr>
<td>950-999</td>
<td>306</td>
<td>454.01</td>
</tr>
<tr>
<td>900-949</td>
<td>181</td>
<td>287.91</td>
</tr>
<tr>
<td>850-899</td>
<td>68</td>
<td>83.49</td>
</tr>
<tr>
<td>800-849</td>
<td>1</td>
<td>2.57</td>
</tr>
<tr>
<td>Less than 800</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>577</td>
<td>836.65</td>
</tr>
</tbody>
</table>

Source: Supplement I, Census Paper 2001. Registrar General Public Census Directorate, Govt. of India, New Delhi

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50 Supplement I, Census Paper 2001. Registrar General Public Census Directorate, Govt. of India, New Delhi
Table -20

<table>
<thead>
<tr>
<th>Sex Ratio (7+)</th>
<th>1991</th>
<th></th>
<th></th>
<th>2001</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Population</td>
<td>Per cent</td>
<td>Number</td>
<td>Population</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>of Districts</td>
<td>(Million)</td>
<td></td>
<td>of Districts</td>
<td>(Million)</td>
<td></td>
</tr>
<tr>
<td>1050+</td>
<td>18</td>
<td>21.2</td>
<td>2.53</td>
<td>26</td>
<td>40.32</td>
<td>3.97</td>
</tr>
<tr>
<td>1000-1049</td>
<td>47</td>
<td>67.76</td>
<td>8.09</td>
<td>65</td>
<td>90.77</td>
<td>8.95</td>
</tr>
<tr>
<td>950-999</td>
<td>139</td>
<td>209.45</td>
<td>25.03</td>
<td>152</td>
<td>277.91</td>
<td>27.28</td>
</tr>
<tr>
<td>900-949</td>
<td>162</td>
<td>243.40</td>
<td>29.09</td>
<td>170</td>
<td>315.49</td>
<td>31.09</td>
</tr>
<tr>
<td>850-899</td>
<td>115</td>
<td>171.28</td>
<td>20.47</td>
<td>108</td>
<td>194.35</td>
<td>19.15</td>
</tr>
<tr>
<td>800-849</td>
<td>73</td>
<td>97.86</td>
<td>11.70</td>
<td>46</td>
<td>86.92</td>
<td>8.57</td>
</tr>
<tr>
<td>Less than 800</td>
<td>23</td>
<td>25.70</td>
<td>3.07</td>
<td>10</td>
<td>8.89</td>
<td>0.88</td>
</tr>
</tbody>
</table>

Source:- Census of India, 2001

In 1991 there were 21 A category districts\textsuperscript{31}. The figure dwindled to eight in 2001 likewise in B category; the figure came down from 306 to 242 during the last decade. In category, C, the number of districts went up from 181-208, in D1 from 68-71, in D2 from 1 to 32 and in D3 from zero in 1991 to 16 in 2001. The D category districts are the daughter killers. The acronym is DEMARU where d stands for daughter, e for eliminating, m for male, a for aspiring, r for rage and u for ultrasound, that is to say "daughter eliminating male aspiring rage for ultrasound. The D category districts are indeed the black holes, in India’s demographic transition and a symptom of the collapse of the civilization.

Those familiar with the field situation in Punjab, Haryana, Himachal Pradesh, Chandigarh and Delhi know that the ready availability of doctors during the ultrasound test and consequent female foeticide, the goods transportation network and

\textsuperscript{31}Ibid
the ability to pay for the services of the mobile doctors are factors responsible for the widespread recourse to ultrasound in rural areas also. As the girl child is a neglected lot. Out of 13 million girls born every year about 2 million die before reaching the 15th year.

There are many reasons for the practice of female foeticide. Poverty is a primary factor responsible for the same. The family which is indulged in the practice makes certain common rationalizations as under:

"........we don't have enough to eat, how we can feed the girl".

"........She cannot go around naked; the boys can wear a loin cloth and carry on"

"........It's only because I did not want her to suffer like me".

But these are all one small aspect of the larger problem: as we can see that the same practice is followed in rich families also. Before analyzing the various factors causing female foeticide, it would be interesting and helpful to have brief look into the status of women in patriarchal societies in India: as the problem of female foeticide is directly connected with the status of the women society.

It has seen that the low female-male ratio (especially in 0-6 age group) is only the tip of the iceberg of the persistent discrimination faced by females. In fact, sex-selective abortion and infanticide are only the latest manifestations of a long history of anti-female bias that is evident in the historically declining sex ratio of the population in India. The central issue is social subordination and oppression of women cutting across age, class, caste as well as time and space. Therefore, if we wish to question and tackle the incidence of this phenomenon we need to understand the conditions that create such a world. In order to do this we would need to place this
phenomenon against the larger background of historical, social, cultural, economic and ideological factors.\textsuperscript{52}

In this research, it explores some historical, political, social and cultural reasons for this anti-female bias in India in order to understand the conditions that create such a world. The experiences of poor and rich women from Punjab, Haryana and Delhi are almost in similar traps.

3.3 Indian Patriarchal Society: Status of Women

Women are the producers but now the owners of property, as the ownership is determined by the legal provision made by the amendment. Although the legal right for the women has enacted by favour her. But man is main owner of the property.

Consequently,

(a) All parental property is divided between the male and female (Co-portioned Right)

(b) Although this results in a strong preference for sons since they are needed to ensure that property remains within the kin and the property through the dowry will be carried by the son

(c) Since ownership is passed on to male descendants, the ‘lineage’ can be carried only through them.\textsuperscript{53}

Women’s labour is undervalued as they practice no control over the product of their labour:

Consequently;

(a) Women are treated as inferior creatures and subjected to violence both physical and psychological.

(b) This status of women is internalized to an extent where women themselves view the fact of ‘being born women’ as a ‘birth defect’.


\textsuperscript{53}Ibid
(c) Women are not paid at par with men.

Women's freedom is controlled by controlling their sexuality. A premium is placed on the chastity of women, which is deemed to reflect the male honor. Thus the sexual purity of women is glorified at the cost of controlling their mobility, and freedom.

Consequently,
(a) Ceremonies marking the sexuality of females are socially important and have to be performed even if not always affordable.
(b) Hypergamy, or the practice of marrying daughters into higher caste groups, is widespread. This implied that a woman—the domain of the family’s honor-can lose her virginity only to a man of a higher social status than her own family.
(c) Excessive dowries are the price families pay to have their daughters married off into higher classes.
(d) Daughters are seen as an avoidable social and financial burden.
(e) Any uprising of women for her rights is oppressed by alleging unchastely.

Though, women in the lower caste groups claim a greater degree of independence in terms of marriage, etc., they are the most common victims of sexual abuse by men from the higher caste groups, which is also a means of emphasizing social patriarchy.

Also, the dowry system and other perceived ‘costs’ of bringing up a girl child have firmly taken place among the lower caste groups, both due to emulation of, and the legitimization provided by these practices among the upper castes.

Consequently,
(a) Female infanticide and foeticide are common even among the lower castes.
Historically, 'the woman’s place in her home; and women’s housework has always been in the category of unrecognized work'. This is true for all women, Hindus, Muslims or Christians, regardless of whether they are housewives or wage earners. For all these women the sole responsibility is households and they are the ones who usually have to manage most aspects of managing it—a full time job, though an unpaid and an unsung one. Social norms in most societies ensure that women’s labour in house work is either devalued or invisible. Such a situation strengthens the understanding that women are non-productive members of a household. Non-inheritance patterns intensify this situation.

3.4 Girl and Women Status in the World

The different International Conferences which held in the different places of the world on the elimination of the all form of discrimination against the girl and women provide the all human rights. These are the following as under.

2. The Declaration of the Right of the Child 1959(DRC)
3. Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages, 1962(CCM)
4. International Covenant on Civil and Political Rights, 1966(ICCPR)
6. The Declaration on the Elimination of Discrimination against Women, 1967(DEDAW)
7. Convention on the Elimination of all Forms of Discrimination against Women 1979(CEDAW)
8. The Forth World Conference on Women Action for Equality, Development and Peace (Beijing)

54 Ibid


For most women, there is a creation of a poor self-image from childhood onwards, with socialization into duties and responsibilities\(^{55}\). Girls grow up believing that being selfless, putting the interests of all and sundry before their own, and being caretakers for their families, is one of the most important facets of their lives. From childhood itself, female children see the special emphasis that is laid on the role of women in bearing children, particularly sons, to carry on the husband’s family name and traditions. The important shown to their brothers further emphasizes their understanding of the significance and desirability of males. Most women realize that they are being given a subordinate status that is reflected in all aspects of their lives\(^{56}\). Many of them accept it, for they have been told, that their aim in life is to be good daughter, and later good wives and mothers and good housewives. Women tend to feel worthless unless they prove themselves by realizing these aims. The fact that these women need to consider their own selves as important, or believe that they by themselves that any basic value, has always been negated. For most women consequently, there is no sense of self-esteem or recognition of self worth, and no structure that gives them an identity lives per se to be worthless, and their feeling of hopelessness is reflected in a statement by one of them—‘What is there in a woman’s life?’

Social pressures have, over time, hammered in the realization for women that they must learn to be submissive, and that accepting neglect and abuse without rebelling is part of being exemplary women. This is typified with the role models of *Sita, Sati and Savitri* being help up before them. Women learn to defer to their men


\(^{56}\) Ibid
folk in all decisions pertaining to the household, themselves or otherwise, as a mark of respectful submission. Of all those who are aware of this subordinate status as an injustice, almost none are able to fight and overcome this social circumstance. Their acceptance (no matter how unwilling), of their low status is reflected in their statements: 'no man gives his wife as much value as he gives even his stomach' or 'if the man is alright, it is good for the woman, otherwise her life is of no use', and even 'in-laws treat woman well only if her husband cares for woman.' In fact, one woman went as far as to say 'God should not create one as a woman. It is good if one has no daughter At least she won't suffer.

Social pressures have also conditioned women to accept in a family. All these pressures manage to annihilate their feelings of self and autonomy, converting them into passive, inactive models of ideal womanhood. Patriarchal societies stress, not only their need for these 'womanly' qualities, but also the women's need to have sons - indeed, married women gain in height if their first-born is a son. Accordingly, women grow up with the knowledge that their function in life is to selflessly serve their families, to be passive, humble and obedient, and to carry on the family name by bearing strong and healthy sons; by being a 'mother machine'.

3.5 Status of Woman: Global Scenario

Two years of preparation for the Fourth World Conference on Women (Beijing, 4-15 September) were rewarded in 1995 when governments reached a global consensus on women's equality, empowerment and justice judged to be the strongest since the series of women's conferences began in Mexico in 1975. The consensus was formalized with passage of a forwarded-looking Declaration and Platform for Action at the end of the Beijing Conference. Two other crucial differences marked this conference; young people had the chance to voice their concerns, and the special interests of girls were embedded firmly in the gender agenda.
In preparation for the conference, UNICEF participated in all UN regional conference, NGO regional forums, and in New York. UNICEF supported regional studies, publications and workshops and also sponsored the participation of government and NGO representatives in the various proceedings\textsuperscript{57}.

UNICEF advocacy emphasized the need for more attention and resources to girls' education and the linkage between goals for girls and for women from a life-cycle perspective, which views for girls and women as part of the same variety. As part of these efforts, UNICEF drew attention to the complementary objectives of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. The Beijing Declaration echoed the logic of this perspective, reaffirming, among other things, that women's rights are human rights and that attention must be paid to the immediate development needs of girls, both as children and as tomorrow's women.

Education was identified as a critical area of concern. The Platform included time-bound targets requiring governments to close the gender gap in primary and secondary education by 2015. International organizations such as the World Bank have committed themselves to allocating $900 million over the next five years to girl's education.

As part of its Beijing activities, UNICEF supported an NGO coalition and global network for the girl child that linked regional NGOs from Africa, Asia, Europe and North America. Support was also given to the NGO Forum in Beijing, where UNICEF highlighted problems related to child rights, girls' low self-esteem, sexual exploitation, violence directed at women and girls (both at home and in conflict situations) and unequal access to education and training.

\textsuperscript{57} Supra n.38
Recommendations from a 1994 Executive Board policy paper resulted in major efforts in 1995 to establish gender training in UNICEF. A previously established global network of gender experts, drawn from UNICEF offices and external institutions, was expanded to more than 50 people during the year. The network advises on strategies to ensure that gender issues are addressed integrally in country programmes.

Regional networks of UNICEF staff and external experts on gender issues were also established or strengthened in the three UNICEF regions covering Africa. Members of these networks provide services such as training UNICEF staff and assisting in formulating programmes. During the year, gender awareness training was provided for UNICEF staff and government and NGO counterparts in countries including China, Indonesia, Liberia, Madagascar, Nigeria, South Africa, Togo and Viet Nam.

Programmes approved in 1995 for Bangladesh, Egypt, Eritrea, Indonesia, Uganda and Viet Nam incorporated goals for reducing gender-based disparities. Programme recommendations for Cambodia and Pakistan (1996-2000) included specific actions to improve the strata of women and reduce disparities in educations. In India, UNICEF assisted leadership training for women representatives in villages punchayats and nagar palikas (rural and urban local government bodies). A number of women, including hand pump caretakers in UNICEF-supported programmes, were elected to office. In Indonesia, gender was incorporated in training for village's administrators and extension workers in thousand of villages. In Viet Nam, gender training for village-based volunteers was undertaken in three districts.
Emergency programmes in a number of countries, including Rwanda, included counseling following sexual assault. A kit was also developed to provide health and sanitary supplies for women and adolescent girls caught in emergencies.

During the year, UNICEF prepared publications on the situation of girls in Africa, East Asia and the Pacific, Latin America and the Caribbean, and the Middle East. Advocacy materials were developed through UNICEF/government collaboration for policy makers and administrators in several countries, including Bolivia, Egypt, Haiti and Iran. In Iran, a national workshop on the girl child early in the year promoted public awareness about health, nutrition and education for girls, as well as gender-sensitive monitoring of ongoing programmes. In the Sudan, advocacy to end female genital mutilation was strengthened.

Increasing men’s participation in family life was identified as an area for UNICEF action during the International Year of the Family (1994), but specific programmes are few. In the Caribbean, NGOs assisted by UNICEF have developed initiatives to involve men more actively in parenting, and the efforts have highlighted the need for similar programmes elsewhere. To encourage these, UNICEF sponsored a seminar, ‘Achieving gender equality in families: The role of males’, in May in Jamaica. A case-study on the role of men and grandparents in families in Viet Nam was undertaken by the Viet Nam Women’s Union and UNICEF in three provinces. The study documented the distribution of responsibilities as well as perceptions and attributes towards gender relations. Follow up on the study will continue in 1996.

Several significant outcomes emerged from a regional conference on intra-family violence (Phnom Penh, December 1994). Cambodia was one of several countries to develop a national plan of action to eliminate violence against women and children within families. UNICEF also assists several Bangladeshi NGO’s in their campaign against domestic violence. Many a female children are killed even
before they acquire the age of viability in the mothers womb. How unfortunate, are such children, whose sex is determined well before they have attained the practical life process in the mothers womb.

3.6 Female Foeticide: Case Studies

The National Law School of India University, Bangalore has prepared a paper on the problem of female foeticide. They have relied upon some case studies done by different researchers. The finding of the case study is summarized as under:

I. A case study of the Kallar Community of Usilampatti in Madurai District of Tamil Nadu- Study of society for Integrated Rural Development (SIRD).

The Kallars are agriculture community also practiced nourishment agriculture till the commencement of the Green Revolution in 1950 with the onset of revolution and building of the Vaigai Dam, part of the land in the region was covered by the irrigation scheme, while the rest of the land was dependent on the rains. The farmers in the irrigated are shifted to cash crop cultivation and it has resulted in widespread disparities with farmers in the rain-fed region. According to the researchers this economic disparity disturbed the traditional system of kinship marriages. It was replaced by marriages on the basis of huge dowries, which became a status symbol. Even the dry-land Kallars adopted the dowry system. It may be interesting to note that though a higher number of Kallars were not harassed for dowry; female foeticide is the most common among them. This suggests the presence of other reasons for this practice.

An Important reason if the impact of the Structural Adjustment Programme (SAP) on the status of women. With the shift from investment capital to financial capital that came about as a result of SAP many Kallar families took to money-lending, and the Kallars soon acquired the status of the economic mafia. This only helped to increase the preference for a male child, as this new power would need to be exercised through males. On the other hand the condition of women in the context
of marriage has deteriorated with only 18 out of 120 wives saying that they led a happy married life with their wishes being respected. The rest were victims of both physical and sexual abuse within marriage-situation which had left deep psychological scars on them. They viewed their gender as being responsible for their condition, and openly admitted an unwillingness to bear daughters as ‘they would have to go through the same pain and suffering’

The practice is common-even amongst Kallars who work as wage-labourers probably since it has the sanction of the richer section of the community.

II A case study of the Gounder Community of K.V. Kuppam Block, in North Arcot Ambedkar District Conducted by Dr. Sabu George as an Incidental Part of His Study of Infant and child Growth and Survival Patterns, in April 1987.

This case study presents an interesting situation where female infanticide is practiced mainly amongst the Gounder Community in the region (Out of the 18 cases of infanticide that were discovered, 17 occurred among the Gounders). The Gounders are a consanguineous group and most marriages take place between uncles and nieces, or between first and second cousins in these situations would have to be very different from those in the north were female infanticide is associated with hypergamy. The authors have pointed out, however, that the Gounders are as affected by the ‘cost of raising daughters as any other community, implying that daughters may be considered a burden.

III A case Study of the Rural Communities of Selected Talukas of the Salem District conducted by VRDP

This case study revealed that the caste system has a deep impact on the people.

On the important results is very strict rule governing marriage, which results in a restricted choice with regard to spouse. However, since it is the woman who has
to be married into a higher caste, she faces more difficulties in this respect. Huge dowries have to be paid as incentives for the marriage. In recent years the amount given and demanded in dowry have reached ridiculous heights, following urbanization are a financial burden, their parents have one of two choices left—the first is to ignore the rigid caste rules and take a liberal outlook at the risk of alienation; and the second is to ‘avoid daughters’. Not surprising then that most families choose the second and easier option.

Another factor that might be responsible for aggravating the practice is believed to be the Family Planning Program of the government.

IV. Case Study of the Rural Communities in the Kriamanglam Block of the Dharampuri District in Tamil Nadu conducted by Search.

The study area is backward and arid region in the Dharmapuri district of Tamil Nadu. It is densely populated, and is characterized by mass poverty, and a low level of infrastructure development. The health facilities are also inadequate with only seven primary health centres catering to a population of 95000 people.

The study revealed that the primary factor for female infanticide in this region was the status of daughters as a financial burden, in the context of the deteriorating economic conditions. In addition to that, the pressures of dowry, domestic violence and alcohol induced abuse often lead woman to decide not to have daughters so that their daughters do not have to share the their fate.

There is also a strong preference for a son which can be attributed to the patriarchal nature of community. The norms of this community allow only the son to inherit property and carry on the family name. Consequently he is considered the parents only support in their old age. The pressure for the male child is therefore exercised on the woman by her entire family as well as the community. A woman who is unable to bear the male children is made social outcaste.
The bias against the girl child exists as much amongst the rich as it does amongst the poor. While in the richer classes it is more the desire for a son, to inherit the property and carry on the family name, rather than hostility towards daughters that leads to female infanticide, in the lower classes the primary cause is unwillingness to rear daughter’s expenses associated with them.

V. A Case Study of Rural Communities in North Bihar conducted by Adithi. In 1993-94.

Female infanticide seems to be wide prevalent in certain districts of North Bihar as is evident from the skewed sex-ratios. The causes of this practice are described as being a mania for sons since he is the one to carry on the family lineage and provide for the family when he grows up. The daughter, on the other hand, is associated with expenditure on dowries, which attaches a negativism to her birth. It is not hard to imagine such attitudes given the male dominated patriarchal structure of the society.

VI A case Study of Rural Communities in Bhind and Morena districts of Madhya Pradesh Sponsored By The Department of Women and Child Development, Ministry of Human Resources Development, Government of India, in 1994.

The authors say that their research indicated that the incidence of female infanticide in this region was very caste specific. The skewed sex-ratios point a finger towards the Gurjars, the Yadavs, and the Rajput- communities. Another interesting observation made was that these communities exhibit still more distorted sex-ratios, where they live in villages entirely or predominantly inhabited by them. These communities have largely been left untouched by literacy programme, economic development and any alternative set of values. The literacy rate among the group is very low. The women are strictly forbidden from working outside the house and
chores such as collection of water, etc. (which are normally done by women) are carried out by men.

3.6(a) Rural Scene

The above case studies relate to the rural areas and economically and socially backward sections of people. But the shocking facts brought out by a recent survey conducted by India Today shows that the situation in the urban affluent society is also in no way different\(^58\). The report of the survey as published by the India Today starts with a reference to the Novel Pinjar, written by the noted Punjabi novelist Amrita Pritam wherein the joy of three sisters are depicted as the birth of a son to their mother and at a later stage when the elder daughter was abducted by a Muslim youth, but she manages to escapes and return to her parents. “Go away, die or disappear. You are a daughter-how can we take back a kidnapped, humiliated girl? You should have died before birth” lament her parents. This novel was written in the social background of pre-partition India’ in Punjab; when girls were considered “burdens” and parents killed or abandoned their newborn girls. Half a century later, modern urban India-with all its social, cultural, educational, economic and technical advancement-still clings to the same beliefs. It is evident from the sex ratio in the 0-6 age group in many urban centres as found in the survey. The table-21 shows the comparative position of sex ratio in the above group in different urban centres as per 1991 and 2001 census.

The survey by India today reveals that, the most prosperous states of India like Delhi, Punjab, Haryana and Gujarat have the lowest sex ratio\(^59\). The most prosperous pockets in some cities show the sharpest drop. For example, the South-West Delhi,


\(^{59}\) India Today: November 10, 2003
where some of the richest and most educated of Indians reside, the child sex ratio is only 845.

Table-21
Sex ratio in cities

<table>
<thead>
<tr>
<th>Cities</th>
<th>1991</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delhi</td>
<td>904</td>
<td>850</td>
</tr>
<tr>
<td>Mumbai</td>
<td>942</td>
<td>898</td>
</tr>
<tr>
<td>Pune</td>
<td>943</td>
<td>906</td>
</tr>
<tr>
<td>Amritsar</td>
<td>861</td>
<td>783</td>
</tr>
<tr>
<td>Patiala</td>
<td>871</td>
<td>770</td>
</tr>
<tr>
<td>Amabla</td>
<td>888</td>
<td>784</td>
</tr>
<tr>
<td>Gurgaon</td>
<td>845</td>
<td>863</td>
</tr>
<tr>
<td>Faridabad</td>
<td>884</td>
<td>856</td>
</tr>
<tr>
<td>Kurukshetra</td>
<td>868</td>
<td>770</td>
</tr>
<tr>
<td>Agmedabad</td>
<td>896</td>
<td>814</td>
</tr>
<tr>
<td>Vadodara</td>
<td>934</td>
<td>873</td>
</tr>
<tr>
<td>Rajkot</td>
<td>914</td>
<td>844</td>
</tr>
<tr>
<td>Jaipur</td>
<td>925</td>
<td>897</td>
</tr>
<tr>
<td>All India</td>
<td>945</td>
<td>927</td>
</tr>
</tbody>
</table>

Source:- India Today, November, 10,2003

as against 904 in 1991. This researcher has noticed another phenomenon during the study. Among the majority of rich Haryanvi, Punjabi Gujarati and Marwari businessmen, the first child is male. This stranger phenomenon in the light of the predominant male preference among the communities is a clear indication of female foeticide at large scale. The situation in India is so serious enough for, the U.N to urge India to take urgent steps to address the problem.

The heinous practice of female foeticide in villages, a result of the age-old belief that a male child is necessary for devolving inheritance, is now an urban reality. Addressing the issue with all its seriousness the Union Health Minister says “If the enactment of a law was the only thing needed to curb this menace this would have stopped long ago...... Even rising education levels have not crushed the myth that
having a son is the solution to every emotional, economic, spiritual and social problem in life\textsuperscript{60}.

As the Minister has rightly put it, the menace is continuing in spite of a stringent law is in force. The Doctors who do the heinous act are smart when it comes to ducking the law. They rely upon code words to avoid the provisions of law with respect to disclosure of the sex of foetus. The sentences like “the sky is blue” and “your baby is fine”. “Baby will play football” are used to indicate that the child is male. The code like “you are in the pink of health”. “Your child is like a doll” or “your baby will dance” etc are used to indicate the female child.

3.6(b) Urban Scene

The India Today also brought out the following three case studies:

**Case I: Naina Sukhija, 39 years**

Ten years after she delivered her second daughter, she is being forced by her husband and in-laws to produce a male child. Elders of the joint family have told her husband that he won’t get a share of the family property since he has two daughters, no son. Sukhija already had an abortion after an ultrasound revealed a female foetus. Her doctor warns against abortion. But Sukhija says she has no choice.

**Case II: Prateekshan Mehta, 31 years.**

Ever since the birth of her daughter, her mother-in-law hasn’t stopped berating her pointing out that all her husband’s cousins have sons, the mother-in-law insists that to carry on the family name, she too must have a son. “She tells me to be prepared for an abortion if I conceive a girl, “she says. Her husband agrees with his mother. What does she herself want? “I don’t know”.

\textsuperscript{60}Communication Minister of India Interview with India Today, November, 2002
Case II: Ananya, 18 months

The newborn was found abandoned at the Danapur locality in Patna in March-2002. Two more girls abandoned in the same area around the same time. She was taken in by the NGO Shakti Vahini, who later found an adoptive home for her. Like her, Apoorva, now two years old, was found abandoned in the Danapur locality. Found with grievous injuries on her body, she now lives with her adoptive parents.

A few more instances reported recently are given below:

1. Killed because she born no Son:

   A wife in Dabawali town was murdered by her husband for not giving birth to a male child. Saroj married to Naresh 12 years ago and now had four daughters.  ^61

2. Man sets wife ablaze:

   In a horrifying incident, a housewife and her two children were set ablaze by her husband and mother-in-law at K.P. Agrahara in Bangalore. In her statements the deceased Samina told the police that her husband and mother-in-law were harassing her for not bearing a baby boy and set her and her children ablaze.  ^62

3. Female infanticide:

   The infant was suspected to have been killed by administering an overdose of sleeping pills, in Darmapuri district, Tamil Nadu.  ^63

4. Girl Child Killed:

   A new born girl child was poisoned to death by her parents and grant parents in a village in Jind District. She was the woman’s third girl child.  ^64

   In the vicinity of Private hospital in Patran, Patiala district, a 30 feet deep well yielded 50 dead fetuses all female.  ^65

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^61 The Indian Express, Delhi, July 12, 2005
^62 The New India Express, Bangalore, October, 2005
^63 The Times of India, Bangalore, August 07, 2005
^64 The Times of India, New Delhi December 18, 2006
^65
The violence on the female for the preference of the son is graver in the India. The women are purchased from the different states as a commodity.66

5. Girl Child Sold:
  Caught in vicious cycle of poverty and hunger the Lambada tribals (Andhra Pradesh) are selling their girls67.
  Gender based violence reflects the inequities: A report by the United Nation Population Development Fund Report 2005 and also reflects the missing girl (mapping the adverse sex child ratio in India in 2003)68

6. In Rajasthan a bakery owner sold his wife of raise funds to run his business69.

7. 25% Girls born in India Die in 15 years:
  Of the 12 million girls born in India each year ¼ do not survive to celebrate their 15th birthday.70
  The Supreme Court has decided in one case that the person who afflicts the violence on female has no right to pettiness71.

8. Religious leaders join hands against female foeticide
  The International Humanist and Ethical Union have observed that there is a great violation of the women rights in the South and East Asian countries such as the India and China72.
  The audience consisted of respected saints, swamis, imams and Jathedars brought together by the Sri Sri Ravi Shanker of the Art of Living Ved Vigyam Maha Vidya Peeth in collaboration with the United Nations Population Fund in a campaign against female foeticide. There was Swami Nikhileswarananda of the Ramakrishna

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65 The Hindu, New Delhi, September 3, 2006
66 The Danik Bhaskar, Panipat July 21, 2006
67 The Indian Express, Delhi, May 02, 2006
68 The Hindu, New Delhi, October 1, 2005
69 The Hindu, Delhi, December 4, 2007
70 The Indian Express, New Dehli, August 24, 2007
71 The Denik Bhaskar, September 16, 2007
72 The Indian Express, New Delhi, May 01, 2004
Mission in Vadodara, Gujarat. The gurus and religious preachers—be it Sri Sri Ravi Shankar or Alahaj Syed Kiberia of Dargah Ajmer Sharif or the Jathendar of Akal Takht, Gini, Giani Joginder Singh, or the head of the Pejawar Math in Udupi, Vishvesha Teertha Swami, or the Brahmakumaris—and others, including the Christian Medical Association, were unanimous in expressing their “grave concern” at the declining birth ratio of the girl child in the country.73

The one doctor of the private hospital was caught to abort a female and the hospital was seized by the Appropriate Authority of Kaithal.74

The president of the Sarvadeshik Arya Pratinedhi Sabha also grave concern against the female foeticides and said the unborn child has not harm to any one and they have the right to born and life.75

9. The Health Minister says, “Govt of India has decided there should be life imprisonment for the people who will indulge in the un-human work of the female foeticides”76. These case studies has been observed by the researcher in the different villages; towns; and cities of the country regarding “Female Foeticide and its various Critical Aspects.

Case Study I-: Usha Rani

Usha Rani had 3 girls. The desire to have a son led her to commit four abortion with the result that now she is suffering from chronic cancer.

Case Study II-: Chanchal

Chanchal had first child a girl. Hence she decided to detect the sex of baby, she went for sex determination test. On finding the female foetus, the abortion was

73 The Hindu, New Delhi, Nov 10, 2005
74 The Denik Bhaskar, July 20, 2006
75 The Hari Bhumi, Rohtak November 6, 2006
76 The Denik Bhaskar, December 08, 2007
conducted in the 4th month. This was dangerous. Now she wants to become pregnant but has not succeeded yet.

Case Study III-Shymadevi:

The couple already had three girls. Hence, the next time they had decided for the test. On confirmation of the female foetus, they decided to abort it. But since the Register Medical practitioner (RMP) was very costly; they asked the local dia to do the needful. Dai’s untrained hands proved fatal, Shyma Devi, as she died of severe health problems.

3.7 Factors Responsible for Female Foeticide

The above case studies reveal that there are various factors, which are responsible for the practice and continuance of female foeticide. However, this researcher considered that following factors are mainly responsible for this practice.

1. Poverty
2. Male preference
3. Dowry
4. Pressure from husband and relatives
5. Stigma attached to women
6. Illiteracy
7. Insecurity
8. Higher Education
9. Richness of people

Poverty is the chief and immediate cause for female foeticide. In societies, where the daughters are perceived as an economic and social burden on the family, the birth of a female child is the most unwelcome factor. The family needs to incur more expenditure for bringing up the girl child. The parents feel that they must devote more time and resource towards with girl child as they grow up. The girl child cannot be left behind alone after a certain age and the mother has to look after her due to
safety reasons. This researcher came across mothers complaining that they had to leave job as there was no one to take care of their grown up daughter; even in urban prosperous societies so not to speak about the rural and poor societies. Thus girl child at the first instance will be viewed as additional expenditure to the family. It is also felt that the family has to make a lot of adjustments to suit the requirements of the girl child but not so in case of male child.

In India, particularly in the northwestern regions, there is a strong preference for sons for various reasons including religious and economic ones. It is argued that the well-established preference for male offspring combined with a merging preference for small families has resulted in a loss of girls either before or after birth. Some writers state that a man ‘experiences an affirmation of his masculinity in the birth of a son’, especially because in the Hindu religion a man’s salvation comes through his son. In addition, in the northwestern regions, sons are considered economically advantageous for a family. They have a much higher rate of employment than girls thereby benefiting their families through their wages. In India, for historical and economic reasons, a girl is still considered to be a burden on the family, while a boy holds out better promises for the parents’ later period of life. Apart from the economic assistance to the family, the sons bring in a dowry at the time of their marriage through their wife and often continue to live in the home with their parents and help them in sickness and infirmity.

While the birth of a son is beneficial to a family for many reasons birth of a daughter is not. Possibly the biggest problem with a daughter is marriage cost predominantly of a dowry. If the first birth is female, the next pregnancy had diminished chance to complete full terms of pregnancy if the foetus is female. The parents of poor and middle-class families who cannot offered cost of marriage

[7]Kaur, Singh and Dubey, “Grouping up in Rural India: Problems and Needs of Adolescent Girls” (1990); Advent, New York,
(including dowry) prefer to have remedy to sex test\textsuperscript{78}. If the female foetus is detected, an abortion is preferred. While dowry factor contribute to the viability of girl child, it is not the only factor responsible for female foeticide. Another significant factor is the economic contribution made to the family by a woman through her participation in the workforce. Millar finds a correlation between female labour participation rates and juvenile sex ratio India. Where female labour participation is high (As in some southern states) there is always a high preservation of female life and where female participation is low {as in North India} female children may or may not be preserved\textsuperscript{79}.

As indicated earlier, in the 2001 Census child sex ratio has declined States and Union-Territories expect in Kerala (5 points increase) Sikkim (2 points increase) Tripura (8 points increase) and Mizoram (2 points increase). In these states women play more active role in productivity and their participation in labour force is high as compared to northwestern regions. Southern states comparatively represent the low female foeticide rate than the northern states In South India, the main form of agriculture is rice cultivation, which is labour oriented. There is lower percentage of land owning families which means that there are more opportunities for women to work in the filed along with men and the families rely more heavily on the extra money that is brought to the family by these women. In contrast, in the northern regions, there is a higher cultivation, which is less labour intensive than the method used in the south In northwestern regions there is significantly less participation of women in the labour force and consequently the worth of a women in an economic capacity is much less than that of a man. Thus the status of women coupled with their economic contribution to the family income has a direct link with the preservation of female life in India. The female foeticide which may be considered as an undated

\textsuperscript{79} Supra n.20
version of female infanticide is being practiced to a greater or lesser degree not only in India but also in South Korea, China, Hong Kong and other South Asian countries also.80

A major Indian strategy to control the abuse of prenatal diagnosis and related female foeticide has been legal prohibition. To combat with the problem of female foeticide, several suggestions have come from the side of social scientists, legal scholars and women activists. In this regard the suggestions of Barbara Miller have a remarkable value. Miller has suggested a plan, to which, a system of financial penalties and incentives can be introduced. According to this model, it would be more appropriate to make having son expensive through levying a ‘son tax’ fixed according to income. This researcher subscribes to the view of awarding incentives and measures like free ration for all minor females and educational allowances etc. But levying of penalty or ‘son tax’ are unworkable solutions. In Indian society, usually the father holds the primary responsibility in the family for all practical purposes. The hard realities of life within the society in relation to the family are to be tackled by the male members. So the above said economic reasons like poverty, dowry etc. are ultimately the worry of the males. So it is quite natural that the male members. Especially, the husband would make up a mindset against the birth of female children and they will prevail upon the females and force the mother to go for abortion. This poses another question as the right of female over herself the right to self esteem, right to her body, right to select her offspring; her reproductive rights etc are not recognized by the society. She has to act as per the dictates of the husband and the relatives.

80 Dias. “Amniocentesis and Female Foeticide” Bulletin of Indian Federation of Medical Guilds. July 1988 p.56
Table-22

Inter relation between female foeticide and factors like dowry, male preference and pressure from relatives (percentage-wise)\(^1\)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Urban</th>
<th>Rural</th>
<th>Semi-urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dowry</td>
<td>22</td>
<td>35</td>
<td>18</td>
</tr>
<tr>
<td>Poverty</td>
<td>13</td>
<td>27</td>
<td>21</td>
</tr>
<tr>
<td>Pressure</td>
<td>26</td>
<td>34</td>
<td>14</td>
</tr>
</tbody>
</table>

(Source: www.Datamationfoundation.org.in)

The stigma attached to the women and the related insecurity is another factor. It is very difficult for the females to live an independent life and remain unmarred. The society feels that the female is solely dependent upon the male and every female shall be bound to some or the other males. Even most of the average females in India consider marriage as their ultimate purpose. The mindset of males and their approach towards females are also relevant at this point. An average Indian female is always at the threat of exploitation and outrage, be it at the school where she attends, the office where she works, the bus or train where she travels, the family where she lives, the surroundings and everywhere she exist this phenomenon drives her to seek the company of males throughout her life. Probably this may be context where the controversial reference in the Manu Smruth becomes relevant.

“.....Pitha rakshantu balye
Bhartu rashantu youvane
Puthru rakshantu vardhayakye
Na Shitre Swathanthramarhathi...”

-Manusmruthi

The origin of the India idea of appropriate female behaviour can be traced down by Manu in 200 B.C\(^2\).

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\(^1\) www.Datamationfoundation.org.in

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\(^2\) www.Datamationfoundation.org.in
The illiteracy among the women is one of the major factors the women shall be aware of herself and her own rights.

It has been concluded in various studies that a woman is not conscious of her own identity, which is an indispensable for progress. She is unable to recognize her role in resolving her problems because of the prevalence of systems like dowry etc. The mind set of girls and women are shaped by cultural and institutional notions of themselves as inferior citizens, and the girl child as a second class commodity. On that background women themselves decide against bringing girls into the world to endure the cruel existence imposed by a strong patrilinear society. The murder of girl foetus is justified as means of avoiding the extravagant overheads of a daughter’s wedding and dowry. While the procedures may vary, the dowry system prevails in all communities. Marriage expenses vary depending on the community and the economic condition of the family.

Those women who undergo sex-determination tests and abort on knowing that the foetus is female are actively taking a decision against equality and the right to life. It is prevalent among top economic groups particularly in urban areas as compared to rural areas because of easy accessibility sex-determination technologies. Wherever the latest technologies have reached there is great decline in the sex ratio.

The higher education in the society reveals that the people who are more educated always inclined to the more sex-selective abortion. There is lot of research in this context mentioned in this research work as and when the matter required. The higher income group more diverted to the new reproductive technology i.e ultrasound to detect the female foetus because rich people have not any bar of any financial matter. They paid the much more than the required by the technical person and socio

\[\text{Supra n.79}\]
economic culture leads them to do this heinous crime. They want the son only for the heir of their property, but in case of female the all their property may be transferred to their grooms. This also led them to detect the fetus of the female and abort them.

3.8 Elimination of Female Foetus: Attitude of People

What is the attitude of people, which are responsible for the elimination of the female foetus? Attitudinal survey, seminars and conferences in different parts of India with regard to sex determination tests aimed at sex selectivity for abortion, has become a integral part of study.\(^3\) By mean here the cultural and inter-subjective experience and field of understanding. Attitude seems to approximate Bourdieu’s concept of habits is postulated not simply as an abstract entity of the conscious mind.\(^4\) It is to be seen as both conscious and reflexive activity as well as influenced by shared and embedded predispositions. While infanticide and/or foeticide is an individual activity, it is also a socially adapted activity. The question thus raised is how does the mindset relay the patriarchal structuring of the family with the aid of science? The serious impact of the foetal-ultrasound technology is evident through the public debates around the ethics of the practice and the worrisome adverse sex ratio of the children in India, confirmed officially by the decennial Census of 2001. It tries to understand what all constitutes the making and working of the mindset at the micro level, aggregating the macro level into highly-skewed sex ratio, in the range of 927 to 750 girls for 1000 boys. And what is it that still makes it a commonly held view that girls are not in short supply, if anything, rather boys are valuable as well as scare? What is so overbearing that goes into raising daughters as against sons and sustains the general feeling that girls are ‘not ours’ but someone else’s property

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(paraya dhan), they are burden, and are held in trust to be duly handed over to their lawful owners?

3.9 New Reproductive Technology and Elimination of Defective Babies

Parent’s and pregnant women’s expectations have, in the last five decades of the 20th century, clearly changed with advances in knowledge and technology regarding delivery of health care during child-birth, especially in the West. Medical technology, such as ultrasound and amniocentesis offer much more reliable antenatal screening and diagnosis than was previously possible. This had enabled people to know the unknown aspects of a foetus. Ultra-sonography is medically considered a harmless test in the sense that it has no radiation, and no pricking is involved. No fluid is taken in a routine sonography. It involves just a probe on the abdomen where sound wages are sent; they reflect back and are picked up by the probe again. It is indeed a technological feat and empowers man over nature. It is common to have three sonography tests, one in each trimester of pregnancy in the West.

The technology for foetal testing has brought down to a great extent, high risk births, such as babies born with neural tube defects or Down’s syndrome, known to be the main contributing factor for mentally retarded babies in the world. The main diagnostic test for Down’s syndrome is amniocentesis. It provides opportunities for women to have late babies without being interrupted, in their studies for professional advancement early in life. It is only done and warranted in high risk pregnancies where the mother is 1) more than 35-40 years old, to rule out Down’s syndrome as it is known to happen in mother who are the first time pregnant at the advantage age and 2) where there is a family history of a genetic disease. If the foetus tests positive, the parents have a choice to keep or terminate the pregnancy. The

results of the test take up to one month to obtain, by which time the pregnancy will be advanced. Since the desirable time for the test is between 16-20 weeks, it is risky and painful to abort at the advanced stage of pregnancy. The test is diagnostic and usually provided definite confirmation of Down's syndrome and other chromosomal anomalies of the foetus, except in some cases of ambiguous results because of laboratory errors. With an increasing number of women coming under the fold of antenatal screening since the medicalisation of birth began in the early 20th century, foetal testing has attracted a greater involvement of women in decisions about their treatment and that of their unborn babies in the West.

3.10 Birth of Baby: An Essential Sacrament

Reproduction is at the heart of feminists' (of various hues) explanations for subordination of women. It is also seen by demographers as being so, especially revealed through the theory of demographic transition. Birth of a child has been regarded as a critical event, considered with substantial social and individual significance. Moreover, the birth of the first child is of special importance since it signifies the transition of the parents into a new social status. It marks the sexual and social maturity of the mother, the visible significance and cementing of the marital tie. Births are empowering for parents, especially for mothers in a number of cultures.

The absence of being able to give birth makes it clear how critical birth is for couples, especially women. Societies where women's basic identify is primarily through motherhood, the pressure to perform and conform is massive. The failure stigmatizes the woman. It spells a doom and amounts to social barring of sorts. The fear is, of dissolution of marriage and the consequent evaporation of all a childless woman has by way of status. The harrowing experiences of childlessness, faced

particularly by childless women in rural India\textsuperscript{88} in Delhi, in Egypt and in many parts of the world are blatant\textsuperscript{89}. The desire for pregnancy and childbirth is a frequent theme\textsuperscript{90}.

It is not only that motherhood brings status to a woman but also it is a trait without which she is useless\textsuperscript{91}. A woman in patrilineal society gains status and position through motherhood, especially through producing sons for the family and the lineage. She justifies her existence and is privileged only as a mother of son/s. The many cases describe how disconcerting and disheartening births of ‘daughter only’ can be. The fact of being born male or female carries different behavioural expectations per-meeting most spheres of life. While a son’s birth is much desired, a daughter’s (if she happened to begin her mother’s fertility career) is acceptable and tolerated. ‘Everyone knows that it is better to spend a hafty amount now than to raise another daughter, who is in any case going to be someone else’s property and drain the family resources all her life. By the phrase, drain on resources all her life, she meant the constant flow of gifts that will continue not only from parents to her and her affinal family members, but also from her mothers, brother to her and to her children, their male spouses and her conjugal family members, at lease until her children’s weeding if not later on too. Similar comments have been frequently made by people when probed with reference to the hoarding that boldly announced this perception. The common advertisement in Punjab, Haryana and Delhi as in many parts of north India in the late 1970s and early 1980s, before the success of the feminist pressure to ban amniocentesis for sex detection, had struck the right chord.

\textsuperscript{89}Widge, A., “Beyond Natural Conception: A Sociological Investigation of Assisted Reproduction with Special Reference to India”, (2001)
with people, it stressed on the economic sense and lured people thus: ‘Spend rupees 500 now rather than spend 50,000 or even 500,000 twenty years later’ (in marrying off a daughter). This advertisement did no make a distinction between the first and subsequent daughters, and signifies the attitude towards the daughters as a category.\[92]\n
3.11 Daughter as a Burden

Female foeticide is not approved and/or practiced for the first female foetus. As majority of the births in India still take place at home, ultrasound is rarely conducted as part of the antenatal routine examination. The first baby is accepted with joy. It is a relief for the families, both conjugal and natal, that the mother and baby are fine. Of course, if the first born were to be a son, the families are overjoyed. Fifty years ago when a daughter came first, there was joy and relief, except perhaps among the casts notorious for female infanticide. Like at present, it was even then accompanied with earnest hope that the second baby would be a boy. Mothers and families with successive daughters were sympathized with as they had to continue to have babies until at least one son was born. The research in rural Rajasthan shows that while it is important for women not to be few women who did have a baby after they became grandmothers were the ones who had no son. It was not very comfortable for these women to produce babies while their grandchildren were born. There was a sense of clumsiness and shame associated with childbirth at that late stage in life. But their dilemma was understood by many, even though their children were not openly approved. Family strategies were actively planed and executed until the social most favorable number and sex composition of children was obtained.

What has changed in the past fifty years is the ability of parents to modulate the composition of one’s children, especially with the introduction of foetal-sonography. Parents now do not consider it worthwhile to have daughters until a son

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\[92\] Supra n.67
happens to arrive. Presently, they usually want only two children and wish that at least one among them is a son. One daughter, a couple is not seen as undesirable, it is more than one daughter that makes the latter ones undesirable. There is a large body of research available on neglect of daughters, higher mortality of daughters than of sons, strikingly low sex ratios by parity and birth order.\(^93\)

The importance of a daughter for the parents, who find her emotionally more close and who is more concerned about the parents than a married son, is also commonly heard. If there is only one daughter parents try their best of accumulate whatever they can to raise her and marry her off, keeping with prevailing expectations of their caste, class and such circumstances in mind which also contribute towards setting of standards for raising daughters in the group. One may recall Krishna, who is the Gita, exhorts Arjuna to low by making sacrifice. A daughter’s parent’s glow in the sacrifice of making the gift of the virgin to the conjugal family at all life-cycle ceremonies and celebratory occasions is also a means of earning punya (religious merit) for the parents and the brother. Huani/huasni (a generic term in Rajasthan for a married daughter of the household/family) brings punya to the natal kin by receiving gifts from them.\(^94\) Those who have no daughters do so for daughters of the male agnates. Marrying off a jethuti (daughter of the husband’s elder brother) earns more punya and glow, i.e symbolic capital than marrying off one’s biological daughter, was often stated by people in the village study.

Sisters do have a ritual and social significance in their brother’s life in north India, i.e. even among those communities that do not practice cross-cousin marriage.

\(^93\) Supra n.79

A married sister’s ceremonial and ritual significance in North India. Daughters are adopted and/or brought in to be raised and their marriages arranged in mythological and scriptural texts in India. Mahabharata mentions Pritha, the daughter of Sura adopted by King Lomapada. Such an act was not a ritual requirement, nor did it economically strengthen the adoptive family. Nevertheless, it helped the family attain punya through giving the daughter as a gift in marriage. The other aim was to strengthen friendship between families. As a goodwill gesture, girls were adopted. The reasons for which daughters were adopted were different from those mentioned for adopting sons. As long as there is only one daughter, the ceremonial, ritual and religious, as well as the everyday life’s routine aspects are not seen as extremely burdensome.

3.12 Importance of Son in Family

A son’s birth is a means privileging the mother. Thus the dilemma of being the second sex and yet craving for the first is resolved through the practice of patriarchy. Majority of the Indian women would be shattered to only have successive daughters. The birth of a son is perceived as an opportunity for upward mobility while the birth of a daughter is believed to result in downward economic mobility of the household and the family.

A mother’s height increases by two-finger-width when a son is born to her, was a common phrase in the town and in the adjoining rural areas in Rajasthan. It is not just women who feel in seventh heaven upon bearing a son. The case of a man who married thrice, one after another woman to have son, but never manage to have

one, is a telling one. Though he had daughters, his status in the village as an old man was not the same compared to others of his age group. Most of his contemporaries had one or more able bodied sons, their wives and grandchildren living together. It was not a usual sight for an old man of his age to carry water, or take cattle for watering, done usually by younger household members. But the man had no one else to relieve him from such menial household tasks when it was his time to be in hatai (meeting) taking place frequently at some public spot/joint or someone’s house in the village. A son’s birth immediately means the reverse of a daughter’s. An old man in a Rajasthan town was known in his neighbourhood for his popular address for new-born babies in the locality. Employed with the Indian Railways, his family occupation was tailoring, in which he joined after returning from work and on weekly holidays. Tailoring brought him in touch with many more people in the locality. Every time he heard of someone having got a son, he said, ‘oh, so Muffat Lat (a free lad) and arrived’. If it was a daughter, he would say, ‘Oh, so came the Ayee Chuki (enough of coming)’. Because a son’s upbringing and education cost is evened out through the dowry he commands at his weeding, he is almost free for his parents as it were, thus Muffat lal for a son. On the other hand, expenses in raising a daughter have not only to be incurred, she has to be paid dowry on top of it all, in order to marry her off, the prime responsibility of the parents, thus one is enough of a coming (Ayee Chuki)98.

The stigma of sonless ness is not an abstract one, but rests on very hard ground, it is very blatant. The misery of not being able to produce a son is not limited to the household or the mother-in-law daughter-in-law, dyad and the family. It is a failure to perform. As mentioned earlier, infertility is a curse, next is inability to bear a son. It is nearly as stigmatizing, lesser so in large cities in Delhi in brief conversational acquaintances among neighbours. But among the family and relatives, it is a major incapacity for parents. It soon brings to forefront the blame game within

98 Ibid
the family. Despite what science of reproduction might say about the sex of the baby being dependent on the Y-chromosome, people blame the woman for her inability to provide a son to the family. Often, it is not even blame. It comes as a serious worry for the woman’s natal kin that she is unable to bear a son for the conjugal family. The fear that a co-wife might be meant, lingers. Ways and means of conceiving a son are mentioned in Indian folklore, traditional medical systems and in Kama Sutra. Sonless women and couples try various medical, religious and shamanic means to have a son. The idea of all relatives forming a sort of panoptican as it were in Balinese society is close to what goes on in India families too. People’s affective commitments and fears are mediated through the family and community.

The micro politics of the family disadvantages its women, especially younger ones. It is with the birth of sons that mothers get a stronghold into the family. Whether the husband and in-laws approve or not, women find producing girl babies, especially after one, to their disadvantage. They have a vested interest in avoiding a daughter’s birth, especially after one has been born\(^5\). It recounts the killing of daughters by low caste women in south India. Mothers justified killing of daughters so that the girls could avoid repeating the same miserable life. It is in the light of a overabundance of considerations such as the above that the Rig Veda prayer asking, ‘birth of girl be granted elsewhere and here grant a son’, becomes meaningful.

With a decline in infant and child mortality along with a myriad associated development, younger couples are more confident of taking the risk of putting a stop to their fertility after having fewer children. The other risk they take in arranging fertility earlier than their parents did, owes to a sense that life is getting harder. Both material cost and human cost of raising children in rapidly rising\(^9\). The demands children make on parents is on the rise. They live off their parents until they begin to

\(^5\) Ibid

99 Ibid

171
earn a steady income for which parents are expected to spend on them and even better for their children. For completion of aspirations, the number of children one has is to be curtailed. What is critical is the control of the sex composition of a possible number of children, which can now be fine tuned more carefully with sonography. Female foeticide is being substituted for female infanticide for whoever can borrow the finances to avoid having many daughters. Beside the emotional dilemmas, the low cultural value a daughter has in the context of uncertainty around her rearing, and eventually in settling her down in marriage are major considerations right from the time she is born. Kin and other networks support this perception. A silent approval to the subsequent course of action is a sign of social sanction. Nevertheless; female foeticide is not seen as an act appreciable in others’ eyes, but committed for the welfare of the family, which includes gendered structures with the male in authority. In the micro politics of the family and the household, sonography has turned more stringent and instrumental in supporting the culture of son preference and dislike of daughters. To have a place under the sun, son(s) is required. One daughter is acceptable but not a string of them. The sex of a foetus is assumed to be created biologically but technologically detectable, and thus considered terminable.

Accumulation of privileges has always remained of special advantage in social relationships. By having male babies a woman and her family gains social prestige and are more often than not, treated as more privileged than in the absence of male offspring. The desire to have male babies is expressed frequently in blessings showered on the respectfully bowing new bride till she has borne sons\textsuperscript{100}. May you be the mother of a hundred sons and ‘may you continue to have sons and bathe in milk’ (\textit{dudhon nahao pooton phalo}), and flower and prosper (\textit{phulo phalo}) are commonly heard blessings for a young bride. The cultural construction of motherhood and the problem of failure to achieve at least one sons, assumed interest

\textsuperscript{100}ibid
in medical anthropology. Involuntary childlessness was medicalised as the disease of infertility\textsuperscript{101}. The converse of it all is in having sons preferably with at the most one daughter. A sonless woman's future is dark but not that of a daughterless one. Daughterlessness has not been a social or a socio-logical concern. There is the commonly held notion of the desirable sex composition of children as the social optimum sex and number of children. What better way to achieve the ideal sex composition of one's children than to use amniocentesis and ultrasound technologies? The neglect and part rejection of parturient women with female babies is common as is the prioritized attendance on them if they deliver a baby boy.

Both the emotional and micro-political considerations in the everyday and the occasional over the gendered life course are exacting for parents. Mediated through institutions such as sexuality, marriage, procreation, family and modern education for daughters, parents find daughters a burden. Bride wealth practicing castes are increasingly adopting dowry often influenced by the culture industry and more rapidly as they come to urban areas. Among those with high economic aspirations, sonography provides avenues\textsuperscript{102}.

In addition there is a simultaneous universalization of the small family norm. In a situation of poverty where economic security in old age in the absence of welfare schemes, is thorough sons, amongst the two hundred households in Punjab and Haryana talked, all couples wanted at least one son if not two as shown in table-23.

Only 13 per cent of the 183 women talked to wanted more than one, i.e. two daughters and 1 per cent did not want any girl at all. While one daughter was considered socially necessary for ‘kanyadan’, or for the carrying out of certain traditions like the tying of a ‘rakhi’, more than 65 per cent wanted two sons. Their logic was, ‘if you have two trees, at least one will give you shade’ or what is the use of one eye’. About 53 per cent of the women wanted one daughter and two sons. We all understand the significance of these statements. As there is no economic security for the poor in their old age, they still continue to want at least two boys.

However, while women may have had preference about both family size and sex composition, since there is no control over the sex of the child. They have had to make a transaction between the desired and achieved family size and composition as seen in table-24. This table indicates a strong son preference. There is the uncertainty of child survival as well. In traditional societies it is the husband’s desires, or the social rules that finally determine the number of children in a household. In the given social and economic context, acceptance of female elimination is found. Thus, many poor families that may decide that they would rather not have girls any more, is a

Table-23
Couples by Number and Gender of Children Wanted

<table>
<thead>
<tr>
<th>Number of Females wanted</th>
<th>Number of Males wanted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One</td>
</tr>
<tr>
<td>Nil</td>
<td>0</td>
</tr>
<tr>
<td>One</td>
<td>32.5%(65)</td>
</tr>
<tr>
<td>Two</td>
<td>2%(4)</td>
</tr>
<tr>
<td>Total</td>
<td>34.5%(69)</td>
</tr>
</tbody>
</table>

Source: Alpana D. Sagar 2007

103 Ibid

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Table-24
Couples by Achieved Composition of Sons and Daughters

<table>
<thead>
<tr>
<th>Number of Daughters Born</th>
<th>Number of Sons Born</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nil</td>
<td>25.5%(51)</td>
<td>13%(26)</td>
<td>5.5%(11)</td>
<td>4%(8)</td>
<td>48%(96)</td>
</tr>
<tr>
<td>1</td>
<td>11%(22)</td>
<td>6%(12)</td>
<td>8.5%(17)</td>
<td>2%(4)</td>
<td>27.5%(55)</td>
</tr>
<tr>
<td>2</td>
<td>7%(14)</td>
<td>4%(8)</td>
<td>3.5%(7)</td>
<td>2.5%(5)</td>
<td>17%(34)</td>
</tr>
<tr>
<td>&gt;2</td>
<td>3%(6)</td>
<td>3.5%(7)</td>
<td>0.5%(1)</td>
<td>0.5%(1)</td>
<td>7.5%(15)</td>
</tr>
<tr>
<td>Total</td>
<td>46.5%(93)</td>
<td>26.5%(53)</td>
<td>18%(36)</td>
<td>9%(18)</td>
<td>100%(200)</td>
</tr>
</tbody>
</table>

Source: Alpana D. Sagar 2007

rational decision. However, we must not assume that this is a free choice for them, nor can we believe that this choice is more that confers any power on the woman. In fact, female elimination is a statement on the disempowerment of these poor families and especially the females.

The cost of this elimination & non-elimination of the female child to the mother is very hard. Society knows that the position of a woman without son is intolerable. In fact, the Artha Shastras allows remarriage of a man if his wife fails to provide a male heir, and even states that women are only for getting sons.

The issue that we need to understand is- what is the situation of some of the women who go in for female foeticide? And what happens to girls who are not eliminated? This understanding is important because while foeticide is an unpleasant reality, we can only deal with it effectively once we realize the multiple pressures on, and the compulsions of many of the people who practiced it. This realization required

\[104\] Ibid
for us to carry on the war against foeticide at its different fronts. These stories therefore are not in support of female foeticide or infanticide but to unveil the multiple levels at which one needs to intervene to bring about changes in such a deep rooted social phenomenon. In such a situation, a technology that offers people the option to know the sex of their child is bound to be, misused. Today, access to ultrasound and abortion amongst the poor, and financial ability to pay for procedures for sex determination during pregnancy for the better-off, may also be promoting the removal of females. It is stated that abortions following amniocentesis accounted for 1 per cent of female fetuses conceived between 1981 and 1991—though no study has arrived out a class differential on this procedure. It has concluded that 4.2 million female deaths, 0-4 years of age occurred in excess of those warranted by official fetuses and that there was a sex selective abortion 1.2 million female foetuses. While the PNDT Act has been amended, it is important for us to also know just how many states have amended the statement in their state population policies that those families with more than two children should have negative incentives. Within an overall pressure for a two child family in the present social environment, if women who have at least one daughter say they need to find out the sex of the foetus because they cannot afford to have more girls. How can we regulate the private sector where most of the amniocentesis is being carried out. How does one address a situation where despite their lack of logic, the practical and social arguments still continue to flourish? The challenge lies in demolishing the subtle mechanisms of these victimizing conversations.105

The irony of the situation is that when Indian society attaches such great importance to children, at the same time a large number of children are exterminated either before or after birth and many are abandoned by parents. Not surprisingly, the children who are victimized are mostly female children. The major cause of

105 Ibid
aggression and neglect of a girl child can be recognized to the preference for a son over a daughter. The reasons for such an attitude are more a result of the socialization process of traditional social expectations and appropriate social behaviours and not a consequence of individual choice. Preference for a son always gets translated into the subordinate status of girls and may lead to discrimination. The universal desire and preference for a son may be due to socio-cultural, economic or religious reasons, or combination of some of these. The main cause of population problem is not only the desire to have a son but due to poor health conditions, child mortality is high. To have a least one surviving male, a woman has to have five to six children.

In the Second International Indian Geography Congress held in Udaipur the scholars have presented a paper “Preference for Son and Deficiency of Female in Haryana: A Geographical Perspective”. Their study has indicated the increasing incident of Female foeticide in Haryana due to the following reasons. (a) the desire of couples to have a male child for the continuation for their family true and to support them in their old age; (b) sex-selective abortions (SSAs) because of availability of technology for sex detection of the unborn child in abundance; (iii) money-power of people to pay for the sex-selective technology and easy assess to the clinics available in abundance because of improved infrastructure; (iv) the rising demand for dowry that makes daughters financial burden on parents; (v) the consideration of girl as Praya Dhan, because she grows and settles in her husband's household after marriage; and (vi) the feeling of insecurity of a girl child among parents. Female foeticide in Haryana has led to an alarming fall in male-female sex ratio. The researcher also presents the paper in the same conference on the title 'A Regional Analysis of Female Foeticide in Haryana and Punjab state. He himself indicate the different reasons, ill

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107 Dr.(Mrs.) Sneh Sangwan and Dr. Randhir Singh Sangwan “Preference for Son and Deficiency of Female in Haryana: A Geographical Perspective. Second International Indian Geography Congress held in Udaipur Feb 29 to March 02, 2008
effects, cause effect relationships and socio economic attitudinal bent of mind of the people on female foeticide and give the suggestion to eradicate this problem.

3.12(a) Socio-Cultural Reasons

In Indian society, sons are needed for the transmission of family property. Girls can inherit family property but then the rights pass from her natal family to her family procreation, which may not be acceptable to many people. Therefore, a son is required to keep the property within the family. Besides, in certain communities there is evidence of parents being subjected to humiliation within the society if they have more girl children.

Dowry system is one such social evil which is a major cause of occurrence of many other social evils. Fear of inability to meet dowry demands leads to killing of girls, abandoning of girls, occasionally selling girls, foeticide, and infanticide by parents themselves. The inability of parents is a source of much humiliation by society. Also, fear of losing one's daughter in a dowry death or having to face physical and mental torture for not bringing adequate dowry also appears large108.

The most important economic reason is poverty and depression. As noted above, fear of larger dowries and high cost of development a girl child force parents to resort to certain inhumane acts. Girls are supposed as a liability, the fact which is responsible for the degradation of her status even prior to her birth. On the other hand, expenditure for marriage of a son is not as much as is for the daughter. Rather, it is financially advantageous for the family, as the bride brings in dowry109.

Another important reason for a desire for sons is that they provide an economic support and security in the old age of parents; sons are expected to stay with the family forever and help them in their twilight years.

109 Id n.106 at p.179
The need to have sons is reinforced in religion as well. The son enables the father to pay off the debt he owes to his ancestors. The son offers pandas to the ancestors and thus helps in giving salvation. The necessity of having a son is strengthened further when a son is required to perform the rite of lighting the funeral pyre of the father and observe the ancestral (sraddha) rites for the father after his death. Daughters are not allowed by the religious law to perform any Vedic rites. Therefore for begetting a son, any number of girls born before him, are sacrificed.

A strong preference for a son automatically assigns lower status to girls, which very often results in the discrimination against them. Discrimination at times leads to mistreatment, aggression and neglect. The discrimination of the girl child takes an extreme, violent and cannibalistic form when a child is killed either before or after birth, merely because of the fact that she is a female. It is the reason when socio-cultural and religious justifications support such a negative attitude that people indulge willingly in heinous acts like female foeticide and female infanticide. These acts have social approval and persist despite being fatalistic.

An age-old barbaric act of killing newborn female babies is called female infanticide. It is still widely practiced among many communities in India. Another similar practice of eliminating unwanted female fetuses in the womb itself is called foeticide. This practice is also becoming very common and has been made possible by the use of modern science and technology in medicine. The fruits of modern science and technology are thought to be a boon to mankind as they provide a cure for many dreaded diseases. But this boon of mankind has been abused and put to use for destruction of human beings by using it for international killing of female fetuses and thereby dismantling the myth of neutrality of science. This undesirable use of medical

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10 Ibid
technology is immorally tempering with the womb even before the birth of the baby. Another act of hostility shown towards girls is that of neglect and, in extreme cases, abandonment. Neglect does not apparently look very harsh but can result in delayed mortality. These acts of aggression and discrimination against girls legitimize the social customs sanctioned by the whole society, which is already distorted heavily towards sons.

It is not only in the early years of life that girls face such hostility. When girls grow up, they quite often face the traumatic experience of rape, wife-beating, bride-burning and are occasionally forced to be a sati. These acts, against the will of women, are enacted with a purpose. These are not symptom of prejudices only but demonstrate 'commodification' of women who can be put to use according to requirement. Some of these aforementioned acts of inhuman torture of women are comparatively of recent origins and prevalent in the modern society. The acts of aggression against women in traditional society and their persistence in contemporary society demolish the view that the status of women has improved in India.

Infanticide, or murder or deliberate neglect of the girl child to induce death is considered female infanticide. In general dialect, female infanticide understood today is the intentional killing of the girl child after birth. It has been known to occur in many human cultures\textsuperscript{\textit{11}}. In India it has been practiced for the last few centuries the first discovery of female infanticide in India was in 1789 among the Raj Kumar clan of Rajputs in Jaunpur District, Eastern Uttar Pradesh. The East India Company was governing the country at that time. It felt that legislation must be enacted to ban the horrible practice. The Bengal Regulatory Act XXI of 1975 and Regulation Act VI of 1802 declared the practice of female infanticide as murder. Almost one century after the official discovery of the cases of female infanticide in India, an Act abolishing its

practice was passed. This Act was known as the Act VIII of 1870 and was popularly known as 'Female Infanticide Act'. This act was formulated when reports reached the British government showing that villages and tribes 'without even one female child', are increasing. Initially strong measures were not taken. Later on the Act was actively enforced during the period 1876 to 1906. Unfortunately, it was slowly buried due to political pressure from the groups practicing it on one side and half-hearted efforts made by the British to implement it on the other side.

From the available evidence it is clear that female infanticide in 19th century India was practiced primarily in the higher social groups of the North, though this point is also debatable. Other areas where it was widely prevalent were pockets of north-eastern India, where it was practiced by the tribal Nagas, in the southern area by the Todas of the Nilgiri Hills and the tribal Khonds in Orissa.

During the British period, before the ban on infanticide, people were silent to admit the murdering of their female offspring. They never regretted having murdered and infant, rather they rationalized the act by demonstrating that the birth of a girl child meant that the family will perish or be ruined\textsuperscript{112}. The birth of female child was considered a misfortune for the parents. It was a situation when the whole community needed to sympathizes with them and supports them in dealing with their misfortune. Female infanticide had complete social approval. Child sex ratios along with male/female mortality ratio are perhaps goods indicators of female infanticide in contemporary India. The 1991 Census shows that 54 districts, located within just seven states, have a child sex ratio of less than 900. This shows that lesser number of females survive as compared to males. Data of several other child sex ratio studies and juvenile mortality rates in different parts of India support this finding as shown in table-25.


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Table-25
Juvenile Mortality Statistics from North India

<table>
<thead>
<tr>
<th>Sex differentials in infants (0-1 years)</th>
<th>Mortality rates (deaths per 1000 birth)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>Khanna Study (1957-59)</td>
</tr>
<tr>
<td>Female</td>
<td>168.4</td>
</tr>
<tr>
<td>Male</td>
<td>164.6</td>
</tr>
</tbody>
</table>

| Sex differentials in childhood mortality rates (deaths per 1000 population per year) |
|-----------------------------------------------|-----------------------------------|
| Sex                                          | Khanna Study                      | Narangwal Study               |
| Female                                       | 36.9                              | 58.0                           |
| Male                                         | 19.4                              | 29.0                           |

| Sex ratio at death during childhood (Sex ratio-males per 100 females, reproduced as in the study) |
| Age                                           | Narangwal Study                   |
| 0-1 Months                                   | 126                               |
| 0-5 Months                                   | 114                               |
| 6-11 Months                                  | 73                                |
| 1 Years                                      | 62                                |
| 1-4 year                                     | 71                                |


A review of juvenile mortality statistics of two studies in the Ludhiana district of Punjab reflect the existence of female infanticide. The Khanna study shows that death of 168.4 females infants to 164.6 male infants and Narangwal study shows the deaths of 196.0 female infants to 125 males as shown in table-25. In both the

113 Ibid

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studies, the higher death figures of female infants than those of the male are not natural. The childhood mortality rates, i.e., deaths per 1,000 populations per year, in both studies, show female mortality rates almost twice as high as male mortality rates. In the Khanna study, the male mortality rate is 19.4 whereas the female is 36.9. The Narangwal study shows male mortality rate to be 29 per cent and female mortality to be 58 percent as shown in table-25. Sex ratios at death during different periods of childhood also show wide variations. Ratios at different childhood periods also indicate that the number of deaths of male children is more only in early childhood, from 0-5 months. Thereafter deaths are more inclined towards females. After the first two months of birth, cultural factors begin to operate to the disadvantage of females, resulting in higher female morality rate and hence adverse sex ratio\textsuperscript{115}.

Another statistical data shown in table-26 regarding sex ratio by age group shows that only during the childbearing years, that is, approximately between the age of 20-40 years, lesser number of female deaths occur as compared to other periods of life. One may guess that since a woman is valued more for the children she bears, she is more cared for during that period, hence lesser mortality. Otherwise, during other period of life, the female mortality rate is much higher than that of males. It is interesting to note that over a period of seventy years, the trend has remained the same. Similar are the findings in a study of female infanticides in Madhya Pradesh. Table-27 shows that the sex ratio at birth is 837 females to 1,000 males which decrease, if we consider the sex ratio of life births. The sex ratio of life births is 775 females to 1,000 males. This ratio further decreases if one analyses the sex ratio of existing children which is, 500 females to 1,000 males. Thus with increase in age the child sex ratio decreases drastically.

\textsuperscript{115} Ibid
Table -26
Sex Ratio (FMR) by Age Groups, 1901 to 1974

<table>
<thead>
<tr>
<th>Age groups in year</th>
<th>1901</th>
<th>1911</th>
<th>1921</th>
<th>1931</th>
<th>1941</th>
<th>1951</th>
<th>1961</th>
<th>1971</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>1078</td>
<td>1030</td>
<td>1035</td>
<td>1023</td>
<td>1004</td>
<td>990</td>
<td>992</td>
<td>979</td>
</tr>
<tr>
<td>5-9</td>
<td>955</td>
<td>999</td>
<td>960</td>
<td>912</td>
<td>945</td>
<td>965</td>
<td>955</td>
<td>943</td>
</tr>
<tr>
<td>10-14</td>
<td>924</td>
<td>817</td>
<td>822</td>
<td>884</td>
<td>903</td>
<td>936</td>
<td>877</td>
<td>885</td>
</tr>
<tr>
<td>15-19</td>
<td>929</td>
<td>930</td>
<td>916</td>
<td>991</td>
<td>928</td>
<td>944</td>
<td>929</td>
<td>882</td>
</tr>
<tr>
<td>20-24</td>
<td>1092</td>
<td>1078</td>
<td>1075</td>
<td>1023</td>
<td>986</td>
<td>969</td>
<td>1051</td>
<td>998</td>
</tr>
<tr>
<td>25-29</td>
<td>980</td>
<td>968</td>
<td>968</td>
<td>952</td>
<td>984</td>
<td>958</td>
<td>974</td>
<td>1007</td>
</tr>
<tr>
<td>30-34</td>
<td>957</td>
<td>961</td>
<td>854</td>
<td>901</td>
<td>943</td>
<td>927</td>
<td>929</td>
<td>975</td>
</tr>
<tr>
<td>35-39</td>
<td>882</td>
<td>853</td>
<td>841</td>
<td>973</td>
<td>914</td>
<td>897</td>
<td>872</td>
<td>909</td>
</tr>
<tr>
<td>40-44</td>
<td>969</td>
<td>949</td>
<td>945</td>
<td>869</td>
<td>902</td>
<td>882</td>
<td>891</td>
<td>848</td>
</tr>
<tr>
<td>45-49</td>
<td>882</td>
<td>849</td>
<td>823</td>
<td>863</td>
<td>898</td>
<td>884</td>
<td>855</td>
<td>836</td>
</tr>
<tr>
<td>50-54</td>
<td>997</td>
<td>917</td>
<td>954</td>
<td>889</td>
<td>904</td>
<td>902</td>
<td>974</td>
<td>847</td>
</tr>
<tr>
<td>55-59</td>
<td>919</td>
<td>884</td>
<td>860</td>
<td>945</td>
<td>935</td>
<td>936</td>
<td>861</td>
<td>866</td>
</tr>
<tr>
<td>60 and above</td>
<td>1149</td>
<td>1092</td>
<td>1040</td>
<td>994</td>
<td>958</td>
<td>1001</td>
<td>1000</td>
<td>936</td>
</tr>
<tr>
<td>Unspecified</td>
<td>1174</td>
<td>1267</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>863</td>
<td>1071</td>
</tr>
</tbody>
</table>


All the above studies of sex ratio of various regions of India shows that female mortality is higher for all age groups, except during the childbearing years when it is marginally better. Though male mortality is higher in the first few months, after which social factors put a higher premium on male infants to the disadvantage of

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### Table-27

**Sex Distribution of Children at Birth and 0-6 years of Age in MP, 1998**

<table>
<thead>
<tr>
<th></th>
<th>Total reported Birth</th>
<th>Born alive</th>
<th>Now alive</th>
<th>Sex ratio at birth</th>
<th>Sex ratio of live birth</th>
<th>Sex ratio of existing children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>166</td>
<td>151</td>
<td>136</td>
<td>1000</td>
<td>1000</td>
<td>1000</td>
</tr>
<tr>
<td>Female</td>
<td>139</td>
<td>117</td>
<td>68</td>
<td>837</td>
<td>775</td>
<td>500</td>
</tr>
</tbody>
</table>

Source: Premi and Raju 1998:94

females. Perhaps the pressure to conform to the social expectations is so strong that people indulge willingly in the unethical practice of female infanticide.

The large sex differentials in infant and childhood found in the northern states are responsible for their very low sex ratio. The magnitude of female disadvantage in chances of survival seems to be large enough to explain a major part, and some times the entire excess of males, in the populations of the North-Western areas of the sub-continent. Thus both higher mortality among girls, perhaps due to their mistreatment and maternal mortality of women, are major factors in higher female than male mortality.

The disturbing fact that in India, the sex ratio has steadily been declining over the years as can be seen in table-28. The high mortality rate for women indicates that more women are dying either due to natural causes beyond the control of humans or are dying an unnatural death by being killed (like bride-burning, female infanticide, mistreatment, etc).

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Search Bulletin, 32(17);
While variations in the sex ratio at the time of conception can be attributed to biology, sex ratio after that is more under the influence of culture and society. Many cultures define which will be ‘superior’ sex in terms of survival. Sex-selective infanticide is such an example where certain societies systematically kill infants because of the sex of the infants. The culture provides the motivations for infanticide, whether they are seen by the people involved as ritualistic, economic or ecological, ‘Culture “invents” the reasons for which some children who are born are not desired’.

The general perception is that the cost of marriage and dowry has gone up and so daughters have become greater financial liabilities. The dowry system is invariably blamed. We are not convinced that dowry alone is the main causes of female foeticide. Families that are well-off and do not have to depend on dowry to enhance their income, are also opting for female foeticide. The real reason seems to be the high status of families with several sons and the low status of families with no sons. Another interesting factor for the preference for sons is that the prospect of migration of sons to, say the Gulf or western countries, is much higher for men than for women (except in special cases such as Kerala from where nurses to all over the world). In the eyes of the local community, a family with children abroad has a higher status and.

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certainly a higher income level than non-migrant families. Globalization is thus adding to the miseries of the girl child.

In short, there are numerous causes for the spread of female foeticide and it will be unscientific to believe that dowry alone is the causes, as it the general perception. Nevertheless, our perception during the fieldwork did revel that people are aware of the upward swing in our society and numerous TV channels and endless advertisements increase this greed further.

Female foeticide is a symptom of increasing crime against women. It would be manifestly wrong if we conclude that female foeticide is a matter of medical technology alone\textsuperscript{121}. There is no doubt that easy access to ultrasonography has been largely responsible for the spread of female foeticide throughout the country. Many women opted for female foeticide not because they were heartless but because they were genuinely concerned about the fate of girls who are being increasingly subjected to eve-teasing, molestation and sexual harassment and, after marriage, exposed to the risk of bride burning and dowry death, in the unending demand for dowry from our merging consumerist society. This calls for a goods look at gender issues in all their amifications in our increasingly dysfunctional society\textsuperscript{122}.

3.13 Girl Child and Social Problems

The saying, 'may even my enemy not have a daughter' and 'jako maar rayo kartar' (one whom the maker[God] is slow-poisoning) comes from the pain and suffering a daughter's birth and upbringing, can cause to her parents, and her paternal


and even the maternal grand-parents\textsuperscript{123}. Daughter's relatively shorter honorable domiciliary right in their parental home is expressed in different ways. Often girl children are not included in reporting the number of children one has. They are parayan dhan and will be gone soon, is so very often said in many contexts in daughters' faces and about them in referring to them in conversations. 'She is grown up now', 'it is time to think about her match (marriage)', and 'you have some major expenses ahead of you, now that your daughter is grown up', are commonly made statements among friends and relatives. Among the Delhi's middle class, friends of a grown-up girls' mother ask her, 'is she thinking of settling down?', 'you might be worrying about her settling down these days', 'it' will be good if you find some one nice for her'. So the overbearing sense of responsibility to find and unmarried girl a house she can call her own is shared by the well-wishing relatives both on her father's and mother's sides\textsuperscript{124}.

What makes the daughter a dis-preferred, i.e, undesirable offspring, whose birth brings displeasure if not mourning, and a son a preferred child? Is the low social value assigned to the female a cultural imagined thing expressed through emotions? Or does the low value work out its details at the ground level to synchronise with the distress in raising a daughter? The solemn of darkness at a daughter's birth in most parts of north India, is symbolic of what awaits the family where a daughter is born. It was witnessed, in Haryana and Punjab, in every household where a second daughter was born to sympathies with the parents and the grandparents. No gifts or money was given to the new-born, no tea or soft drinks were offered to the visitors, no certainly because the house was in a state of pollution. Everyone had come to express afsos(sympathy) with the unfortunate family. The visit signified that the visitors'


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shared the helplessness and gloom of the family. In Delhi when a professional couple had their second daughter, the neighbours sympathized differently. They said, ‘Lakshmi, i.e. the goddess of wealth has come, it is okay’, implying that though highly expensive she will prove to be, she might bring wealth to the family by her presence, through her karma and her parent’s karma. Coming of females is often symbolically consoled through terms such as arrival of lakshmi. There is no change in the form of expression of afsos(sympathy) between the ancient age to modern age125.

The expression of afsos of the former kind may not be openly appreciated in the Indian middle class in urban Delhi, but it exists in subtler forms and within the inner core of the household. At arrival, second and a subsequent daughter are unwelcome/tolerated in relative terms. The scholar reproduces a girl’s lament upon her birth through a folk song where her birth was announced through beating a brass plate while a boy’s is announced through beating of drums. It is not the difference in instruments used to announce(in Punjab, Haryana and Rajasthan beating a bronze or brass plate is a signifier of a male birth and beating a chaff that of a female), but the meaning the community assigns to the beating of these instruments makes all the difference. Whatever, the means of announcement, the emotions felt and shared with others around and with relatives conveys the difference in meanings between a son and a daughter’s birth. Even in middle class professional families in Delhi, the sweets are offered to them if they visit the family upon a daughter’s birth. Among the lower classes, the sweets are absent if a daughter is born.

The celebration and joy at a sons’ birth, and its reverse at a daughter’s, travels from hospital to home and the neighborhood. Boxes of sweets turn up in hospital labour rooms soon after the family waiting outside learns of a son’s birth, but rarely after learning of a daughter’s birth. The hospital staff don’t expect sweets or cash gifts(for lower level support staff) in the later case. Through there is a great deal of

125 Supra n.110
evidence of neglect of daughters, the open dislike and disapproval is far less once a daughter is born. From the open and auditory, the attitude of daughter dislike shifts to muted and physical, i.e. medical, education and nutrition expenses may be incurred somewhat lesser on a daughter than on a son. But such selective discrimination against daughters in Punjab and Haryana also varies by birth order and socio-economic contexts.

The first three decades after India’s independence have been precisely the decades with highest, decadal growth rate of population. The population grew at the rate of 1.25 per cent per annum between 1951 to 61, at 1.95 per cent during 1961 to 1971 and 2.22 per cent during 1971 to 81. These were also the decades when population control was among the top priorities for the country. In India, fertility control campaigns combined the norm of a small family with the state’s goal of population control126. This twin goal to curtail births and control the country’s population growth differed from that in China, the most populated country. It has closely studied the Chinese family planning programmes, reports that in its initial stages, China dissociated fertility planning at the family level from that of the state level (population control). For India, planning a small family at the micro-level was associated directly with control of population growth of the country and with population stabilization. In India, the state continued to thrust upon people, the idea that the small family was good for them as much as it was for the country. Somehow, it always remained smaller than the people’s actual family. The state wanted people to see such a family size as a desirable one127. People on the other hand, ignored the state’s call for family planning even while the state linked the country’s economic growth with that of the family’s. People’s experience was quite the contrary. This was

126 Shapiro, T.M. W. Fisher and A. Diana, “Family Planning and Female Sterilization in the United States”, 1983. pp 187-188 Social Science and Medicine, 17(23);
evident through the quite acceptance of free contraceptives distributed throughout the 1960s in the Khanna region in Punjab without using them. It was told that just as the forest is not made of one tree, a Jat is not made of one son. A small family for a Jat amounted to courting disaster. The sum of all the demands on the rural, peasant household and the interdependence of the young and old members encouraged the expansion of the household. Not only was it plain and clear to people that those who had more children were usually better-off but also that those with fewer children were worse-off during the first three decades of India's rapid population growth. At least two surviving sons were considered essential during that period. During the high child mortality phase, until early, the 1980s, it was common in rural India to hear the phrase; 'One eye is no eye', implying one son is no son.

Thus the state's logic of directly matching the state's resources with those of the family's, did not appeal to people. The FPP reasoned by describing the distribution of the state's resources among the population. It called upon the notion of the family budget and thinning of the pie's slices with every child added to the family. Neither the state's logic nor their own experience made much sense to people in what the state pressed them to see. In India there clearly was the national population plan with a new model of the family size even if it hardly matched with the size, structure and composition of the family on the ground. People's calculus of supply and demand of children incorporated social, cultural and politico-economic considerations as rational. To them all these factors, child mortality included, constituted a single frame.

With a decline in infant mortality, the landed people began to think about land fragmentation among many sons as less rewarding. With the introduction of laparoscopic sterilization technology in the 1980s, rural young couples had begun to

\[\text{Ibid}\]
accept sterilization after completing their family. The women in rural Haryana, Punjab and Rajasthan reasoned in support of sterilization only after attaining the social optimum of children by asking, ‘where is the land?’ This implied that each son will have lesser land than his parents and it should not be fragmented into smaller sizes by having several surviving sons. Families with several sons were sending one or two to urban areas to explore possibilities of income sources. People in villages told about the life in cities is tough and costly unless one has a good education and a job with a regular income. They saw household benefit in mixing their investments in both agriculture and the urban sector. The however wanted two sons, so that they could educate one to send home regular payment through an urban job\textsuperscript{129}. Sons are obliged to care for old parents as there is no pension for most of the elderly in Indian except a fraction of them who had secure public employment. But sons are important for many other purposes in routine life, and caring for parents in all-encompassing manner. Caring for parents should therefore not be seen as mere economic provision for parents’ food, clothing and shelter. To have a son or two while the old parents are alive, means a respectable life, not only within the household but outside too; and means a sensible priority.

People have controlled their fertility in the past as well, but younger parents accept sterilization more easily than did their parents. With a decline in infant and child mortality, along with a many associated developments, younger couples are more confident to take the risk of putting a stop to their fertility after having fewer children. The number of sex composition of the surviving children is critical to stop reproducing further. Even in the mid 1980s, those who got themselves sterilized had assured that they had two or at least one son. The other risk they take in arresting fertility earlier than their parents did owes to a sense that life is getting harder. Both the material and human cost of raising children is rapidly rising. The demands

children make on parents is on the rise what with a wide range of consumer goods in
the market competition for attention. The sex composition of possible number of
children can now be fine tuned more carefully with new reproductive technology
(NRTs). It is convincingly argued with supportive macro-level data that the decrease
in fertility and sex bias are positively correlated130.

By late 1980s and 1990s people see for themselves that the well-off families
were those where each couple had fewer children. By the mid 1980s, urban exposure,
urbanization and mass media influence (Culture industry) had increased in most parts
of India. A small family with three children per couple, followed by sterilization, has
been considered desirable by young Indians since the late 1980s and by the 1990s
some prefer only two or even one child. Ultrasound technology has enabled them to
get a firmer handle on the means to keep the family small. Of course, urban, rural
religious, and socio-economic status difference are found in what is a desirable
family, but as specified earlier, such integration cannot be taken up here as the
emerging common feature; all want fewer children than their mothers wanted, but not
without a son. Also, the religious difference in fertility in India has become a
contentious issue and deserves a separate treatment. However, the lack of
convergence between the state’s small family size and that of the society’s, remains
across religious communities, notwithstanding their fertility differences. While a
majority of the Hindus may be inching towards the state’s model for the two child
family, they are skewing the sex ratios terribly; the poor among the lower castes and
Muslims may not yet be nearing the two child family, but they are not creating as
severe demographic imbalances and ethical problems through the use of sonography.
Further, on the whole, Muslims seem to resemble local patterns more closely than a

130 Das Gupta, M. and Bhat. P.N. Mari, “Fertility Decline and Increased Manifestation of Sex Bias
categorically different pattern of their own\textsuperscript{131}. In both the cases, the state finds the society’s response to its population stabilization goal challenging, rather than appreciative, despite 55 years of effort.

Every one in north India knows that it is better to spend a hefty amount now than to raise another daughter, who is in any case going to be someone else’s property and drain the family resources all her life(constant flow of gifts continues not only from parents to the daughter and her affinal family but also from the mother’s brother to his sister’ conjugal family and sister’s children at least until their wedding if not later as well. Accumulating resources for dowry is the common anxiety expressed by most people in public, as well as, private conversation.

It is somewhat easier to find women, aged 40 and above, to have more than two daughters in the present time in 2003. Though such women would not have liked to have three or more daughters, they accepted them until they had at least a son. The historically infamous girl child neglect in many parts of India and female infanticide among many communities might be related with parents’ acceptance of girl’s birth in the absence of the possibility of knowing of the sex of the foetus. Female infanticide is a historical feature of 19\textsuperscript{th} and 20\textsuperscript{th} century India, while female neglect is found in contemporary India, especially north India.

Female infanticide has been spreading to the erstwhile female tolerant region of South India as well. Younger women today prefer to use ultrasound test and abort the female foetus to have control on the number and sex composition of their children. They are less willing to accept daughters as they come. Ultrasound

technology is incorporated into the culture of non-preference not for the daughter as such, but for more than one daughter.\textsuperscript{132}

Sonography has a potential to reduce the separation between ‘desirable’ and ‘actual’ reproductive outcomes. The technology and people meet each other with a rapid speed. The technology has become desirable as it is seen to be in the specific service of the pregnant woman and her family. The formal and informal networks of the state and the community have been the conduits that have brought about this fit between ultrasound technology and their popular use. Formal organizations and informal relations work in close collaboration with each other to make this particular practice of sex determination test and female foeticide so accessible and popular. An essay reveals the social context of informal relations doctors have with those having formal authority, which makes it difficult to take action against unethical practices. Health workers, be they doctors or paramedical workers, have their social circles as do other people in the community. And wherever there is any convergence of interests, aspirations and meanings between the people and the states, state measures get plucked out of the package. Until the mid-1980s often came across the comment, ‘Is Raj(State) feeding our children?’ If children were not raised on state funds, people reasoned the state should not interfere in asking them to stop having children. This has been now substituted by the following commonly quoted statement, ‘Will they provide for our daughters’ marriage and dowry if we have more daughters?’ The matters of family are considered private matters and the state’s interference is little appreciated.

The normative system consists in the rules and regulations which, people should follow if their behavior is to be accepted by their society as proper. People, in

this case, husband-wife couples, should be accepted as proper in the family and society. We have seen that the state, through its Female Planning Programme (FPP), set up the small family norm for the society to follow\(^{133}\). It the rule that is the norm, not the fact that many people do not restrict their child bearing to it. Norms should on no account be confused with the patterns of behavior which people actually perform.

When we examine the small family norm set up by the state then we are entering into an area of a dual normative system. One norm (of the small family) set by the state and the other norm (of the social optimum composition of children per couple) embodied by the community. The actual fertility practices of members of the community are not the norm, and may in fact differ from either of the town norms. What symbols are meanings people associate with community/society norms, as against those set up by the state, is of significance here. People don’t often dance to the state’s tune. In people’s structuring of the world of marriage, procreation and family, the meanings and symbols of the community differ in significance compared with those at the state level. The world, in which people see themselves as living in families and households, and their domain of reproduction, relates them with one another in a primary and basic manner.

The social organizational units of the reproductive domain hold greater values for people in their day-to-day lives, both in the immediate as well as in the long run, with in the family and outside it. These constitute the basic level which informs and gives shape to norms at the community level. The ties that hold a family as a unit, such as those between husband and wife, parents and sons/daughters, siblings are primary ties and for the society, they belong to the ‘order of nature’. This order in united with the order of law to which marriage ties belong, before they are affirmed through procreation, in the abstract sense. Blood ties affirm conjugality through procreation. The state is clearly in the order of law. The claims people have on each

\(^{133}\)Ibid
other by virtue of their families ties, such as filial, affective and conjugal, are stronger and closer than their claims with the states. Society has its values and supports the ensuing performance of its members to fulfill its norms even if it requires them to circumvent the state’s norms. People’s relation with the state, i.e. at the order of law, in these arenas comes only next. The state norms are appreciated as long as they assist the units into which the reproductive and familial domains function. If state norms contradict those of the community, the resistance is likely to become apparent. Non-compliance is perceived at the society’s performance level because the people’s (society’s) world and that of the citizen’s (vis-à-vis the state) world, though overlapping, are not identical\textsuperscript{134}.

Accordingly, state norms, as a conglomerate system, find support less forthcoming from the society, unless it suits the society, or when state coercion is used, like during the emergency. Nevertheless, the government of citizens through state institutions and organs may show shift in people’s norms. Accordingly, people do steer their family sizes closer to those the state wishes them to have. The two liens are parallel, even though the gap between them is narrowing. While one focuses on numbers, same time, there are unintended consequences of state intervention, as with sonography and tilted child sex ratios.

Accordingly, people do steer their family sizes closes to those the state wishes them to have. The two lines are parallel, even though the gap between them is narrowing. While one focuses on numbers, the other considers sex composition as more important. And at the same time, there are unintended consequences of state intervention, as with sonography and tilted child sex ratios. Keeping in mind all the cultural complexities of gender and reproductive political economy dimensions, it would be too simplistic to say that female foeticide is Family Planning Programmes

\textsuperscript{134} Cormack, M., "The Hindu Woman", (1953)pp410-411 Westport: Greenwood Press
(FPP) creation. But it is important to situate historically, how certain state policies and programmes have interacted with people and with citizens during this time.  

3.14 Girl Child and Problem of Dowry  

The excessive care and caution in raising a daughter, once born, begins early. Dowry and the subsequent flow of gifts goes on much longer, often beyond the lifetime of her parents. It is important to point out here that even among castes practicing bride wealth; the flow of gifts after the wedding is usually from the bride's kin to the groom's. As an infant and child, a girl is like fine china, parents take care that she turns out fair and beautiful. The ‘fragile’ and ‘handle with care’ item in a china shop is to remain a desirable bride for prospective customers. She belongs to another family and not where she is born. By consequence, any mishandling by the trustees (parents/stewards) is likely to reduce the chances for her making it big in the marriage market. Marriages being central to life for women in most parts of India, parents are seized with a daughter’s marriage. Her home, her identify and her prestige come through her marriage and in turn fill the prestige for her natal family and the conjugal one. In being raised as a preferable bride, things are easier for her and her folks. It is in the cautions and careful vigil over a daughter, her sexuality and the training given to her to be affectionate, caring and responsible for her conjugal household members, while being efficient and dexterous in household work, and if need be in taking up paid employment, that she is considered as having been raised with love and care.  

In order that a daughter is desired as a marriage partner, her upbringing is accordingly fine tuned by the patterns who then feel greatly relieved. Conversely, all hell is let loose. People often said a daughter has to be carefully looked after because she has to go to another house. If she has any physical deficiency, her chances of marriage, the route into another (conjugal) house, the ultimate destination, shrinks. A  

\[135\text{Ibid}\]
boy remains at home so he could have any deficiency and no one will say anything, but a girl has to go elsewhere. Who will accept her if she is deficient. She is constantly assessed in the initial years of her married life and all blame is put on her parents for any physical deficiency\(^\text{136}\).

That is why often girls with serious illness are neglected with an unstated intention, i.e. let her die rather than be a problem later on when a match for her in marriage is to be looked for. This statement was an eye opener for all, into the mindset that emboldens sex differentials in medical care that all public health data speaks so fluently about. People’s reason dawned on and helps to revise the reason from the symptom as merely of the female child’s neglect owing to her low social value or high cost of dowry. The consideration is to eliminate her poor chances of marriage and greater humility and social descending down of the family, in case she survived with a physical or mental deformity after a serious illness. Marriage has a bearing on the practice of differential care in preventing a daughter from injuries or letting her die if sickly or gravely injured. Nevertheless, even a girl who is normal by general burden for the family. This feeling is commonly prevalent not only in most parts of north India but also in Haryana & Punjab where there is great shortage of marriage able brides.

At a training programme for medical doctors in Haryana, two contrary statements were put forth, both of which when put together convey the centrality of marriage. The most immediate concerns in the humbling sense an unmarried daughter’s parents feel at her birth. All the doctors were unanimous that the common view repeated often about daughters is, ‘where will we go, before whom will we bow low’ (kahan jaenge, kiske qage gidgidayenge) for offering a girl in marriage? The stress remains on how crucial a girl’s marriage is. It is a humbling experience to

arrange a match for her, let alone the economic drain the marriage can be for her family. At the same meeting they also said that if a widower or a divorcee male doctor in his late thirties or early forties wished to remarry it would be tough for him to get a match in Haryana. It is certainly not the case if a young bachelor doctor wanted a match.

The sexuality of girls is closely guarded. She is likened to an earthen pot that should neither be dropped nor chipped. Unlike boys, girls are to be kept under a constant vigil. Wild girls are not good girls. They have to be escorted (if not physically at least in terms of knowing their movements, and of late by giving them a mobile phone to trace their movements) whenever they move out of the vicinity of the household. An older family member or male siblings are the usual escorts. This is an additional task to be performed with more resource and enhanced sense of responsibility. It is a resource the family has to provide for until a girl is married off. Fathers or brothers drop and pick up the small and teenage girls of the family when they visit friends, relatives, go for movies, to restaurants, etc. Once they are college going, they are on their own for college purposes, but are escorted by a family male, mother or old servant when they go elsewhere. Such a vigil is necessitated more in urban areas and is increasingly needed in some rural areas and big towns as well.

Sexual assault on unescorted girls and female children is on the rise, and is frequently reported in the media. It increases the worries of working mothers, who cannot leave their infants and/or children unescorted, especially daughters while they are away at work.

137 Ibid
For upper and middle class as well as for the poor, more monetary and human resources and caution are required in raising a female than a male child right from early on. The cultural mindset tilts in favour of sons on the basis of everyday worries that beset daughter's parents. Among the poor, girls need to be draped more than boys, an expense that parents might much prefer not good to keep her naked. It is a matter of shame and may invite undue attention’, said a poor grandmother in Delhi.

Norms of dowry further devalue women and the female child is considered as economic drain on her family. This devaluation and commodification of women leads to an increase in violence towards them at all levels. Fathers often can think about the dowry they will have to pay to marry off their daughters. They say, ‘who can afford to marry off two daughters in these expensive days! Even one daughter is too many!’ Interestingly mothers see in their daughters future helpers in household tasks, and may be potential wages earners when somewhat older. Women say,’ a son to carry on the father’s name, and a daughter for the mother-to help her and make her life bearable’ and yet they also socialize their daughters into accepting their inferior status.

While most parents do care about their daughters and term them the Lakshmi of the house, yet girls are rarely given the love or respect they deserve. In a situation there choice often has to be made between advantages for the daughter or the son, the daughter usually loses out. Therefore, in comparison to her brothers who will carry on the bloodline, and presumably support the parents in their old age, the girl child tends to be neglected. Being the biologically stronger sex, many girls manage to survive despite these odds behaviour, but this survival takes its toll on their health\textsuperscript{139}.

\textsuperscript{139}Supra n.104
3.15  Gender Disparity: Opinion of Parents

Over the past two decades, there has been a trend in spending money on children’s education, including that of girls, especially in the lower-middle and middle classes, a trend that makes girls nearly as girls the same education, often also professional education. This is in the hope of finding for a daughter a better groom. The trend was women and men their thirties said they were sent to different schools than their opposite sex siblings. Girls were sent to public (government) schools, while boys to private schools. If parents could cut corners and spend higher on sons’ education as English schooling meant better job prospects, it was an investment towards a betterment of the household. The parents now do not lie to follow the same practice into the next generation; they send both their children to private schools. They know that this is important for making a daughter attractive in the marriage market, which is easier to manage if she is working. And they know jobs are easier to get if one has had English-medium education, possible through private schooling.140

Professional girls have better chances of finding professional grooms, a medium for upward mobility. Similar expenses on schooling for sons and daughters signify that younger parents are less discriminatory towards their children. It is also seen as an investment towards social mobility of the family as a whole first through jobs and then through search for a marriage partner. A bride needs to be beautiful, educated and good at work in the home and in her professional field. Neither such as bride nor such as groom is produced without heavy expenses for the parents. Even if a daughter has to leave her natal home to go elsewhere and it means watering another’s garden, the investment is worth it and she is educated primarily to fetch a suitable boy. After a good marriage she may continue her profession if he and/or his family like her to work. Her professional life is only of secondary priority both to her parents and her husband, even though her profession might have been one of the important

140 Supra n.137
considerations for marrying her. It is seen as an insurance and potential for extra income. If they have only one daughter’s the expenses could be near equally distributed between her and a son, but if there were more daughter, priorities might have to be altered.141

Though it is commonsense to prevent expenses on daughters because spending on her is like watering another’s garden, parents prefer to spend money on her education, food, clothing etc. almost as they would for a son. Thus, sons and daughters are equally expensive in upper and middle class groups. Some discrimination is likely to appear when it comes to giving higher education to girls. Heavier expenses on private education of sons may be more easily and willing incurred than for a girl. If there is an alternative, she may be assembling towards her marriage than would be the case of a son. As for his health care, his educational expenses could mean borrowing money with an understanding that he has to be equipped with the capacity to earn to support a family. And, the cost of education is an investment, which through a good job would attract an educated bride with large dowry. Nevertheless, this should not mean that middle class parents shy away from spending on daughters’ education. They spend enough on her education to make her an attractive bride to carry herself in the prospective groom’s circle, and take up a professional job too. Spending on her education enhances the parents’ status through forgiving hypergamous affinal ties with other families. Once they have a daughter, they like to invest the household resources in her. They have disposable resources and can often give higher dowries than they might actually do. Similarly, those in the middle class, receive a large dowry, mutually honorific for givers and the receiver, though they are not usually in need of it. Efforts of status summation by individual

141 Ibid

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households in competition for betterment go on through bearing, rearing and settling down one’s children in socially and symbolically honourable way\textsuperscript{142}.

One gets an impression from seminars and conferences on gender issues that husband and their parents are pushing their wives and daughter-in-law to go for pre-birth sex determination tests and abortions. Our field surveys, focus group discussions and our own impressions do not lend support to this proposition. We find that many women themselves are interested in knowing the sex of the unborn child and they do not see any moral problem in undergoing these tests conducted by doctors: it is like getting blood tests for malarial parasites. And second, most women have an inherent son complex. They know for certain that their status- in the eyes of their family, extended family, community and the village as a whole- will go up with the arrival of a son. Gifts will flow in, there will be celebrations and relatives from far and near will call on them. On the other hand, if they give birth to a daughter, there is general darkness, no celebrations, no gifts and the image of the woman suffers badly. As one of our senior health activities in Punjab, pointed out: ‘women are conditioned by social norms and they do not have independent views, they tend to ditto what the husbands say or think and this is considered as proper behaviour for ideal wives’. In such a situation, enforcement of the PNDT Act became very difficult. We came across cases of collusion between doctors and clients. The modus operandi is as follows: A doctor from a city or even a small town goes to villages with his mobile ultrasound machine and in case the sex determination test shows a female foetus, gives the client an address in the nearest city where abortions are conducted in secrecy. There were cases in Punjab when the police arrested some women for undergoing sex determination tests while the doctors went scot-free. This led to an agitation by several health activities and ultimately the women were set free. In the villages we surveyed, there was a lot of apprehension about our study. Even though we conducted

\textsuperscript{142} Supra n.108
our survey with great tact, it was clear to us that women respondents were not telling the truth when they said that they were not aware of female foeticide. At a well-attended meeting for a focus group discussion in a village in Punjab, the district-level authorities pleaded helplessness with regard to enforcement of the PNDT Act. It was argued that doctors do not have any idea about the legal provisions of the Act and the Judicial Officer of the district, who has to interpret and implement the act, is frequently transferred. Thus there is no continuity in following up cases and, as a result, nothing gets done.

3.16 Pump Show and Dowry: A Status Symbol.

The daughter's groom does not come cheap. Matters of marriage are also matters of money and status. He has to be at least equal if not somewhat better (in education, income, social standing of his family, family's wealth, etc.) than her. Hypergamous marriages have been historically known to exist among the higher castes, who are usually, and have been mostly, also higher class. Those not already of high caste can enhance their caste status as a corporate group through large dowries hypergamosely as in his monography on the Patidars of Gujarat. And the caste groups' status got enhanced through the judicious balancing of resources with population control. Individual households, even while they operate through caste endogamy, are class stratified. Individual households and families try to raise their status through hypergamous marital alliances, which in turn are based on large dowries and high education and/or official/political connections. Providing a hefty dowry and arranging an exorbitantly expensive wedding, after educating a daughter, even if the marriage is not apparently hypergamous is on the rise. Both giving and receiving dowry is an honourable act for both the families concerned. Thus the

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popularity of dowry, though illegal in the state’s eyes, is views as status enhancing by the society, both within the family and the community. The customary and ritual status of the wife givers is slightly lower than that of wife receivers in the generalized exchange marriage, especially in India. This is not true of other societies like the Kachin. The study shows how Levi- Strauss’s generalized exchange presupposes an expansion of trust and credit and the Kachin system has endless sequences of dyadic exchanges which are in the long run balanced quid pro quo. The notion of kanyadan (gift of a virgin). In Hindu scriptures expects gift giver to find a worthy receiver of the gift before whom the self-abnegating gift giver is relatively lower. It is in the sacrifice of the gift that the two come closer and yet not entirely for the gift in general and also the Indian gift in particular.

The feeling of such a differential status between bride givers and receivers the catching on among the lower castes, and among the scheduled castes as well among whom exchange marriage and bride wealth marriage existed. So is dowry on the rise, especially among those who have raised higher taken advantage through the constitutional provision of reservations in education and jobs. Many of the agricultural and service castes and the lower castes in rural Rajasthan that practiced bride price until three decades ago are shifting towards dowry, as a mark of raising their caste’s status in the caste hierarchy and their households; status within their caste group. A study describes a similar trend among the hill people in Garhwal in Uttarakhand. It finds shrinking female autonomy, dowry marriages, and education without outside employment as means and consequences of sanskritisation. The seeing of the groom’s family being ritually higher is symbolic of the hypervamous preference. This posture is to be maintained for almost all the time, and carried on by

the brides; brother after her parents' death. The customary claim of a daughter on parental property and eventually on her brother's property, especially by way of customary gifts to her, members of her conjugal family and her children, is highly significant and often substantial. Similar is the claim of her offspring on her brother for his presence and for customary gifts, at least until his sister is alive. The importance of the son is thus not just for the mother and the power that comes to her through his birth, but it is important for the sister throughout her life to have a brother to carry on the supply of customary gifts to her and her conjugal family. A son's father's confidence is enhanced is dealing with dowry and the ensuring gifts if members of the bride giving family. Besides, a brother is the emotional shield for a sister and also her husband, in case of any troublesome eventuality or misfortune.

It is odd that daughter dis-preference is on the rise among the wealthy and the middle class in India, and by emulation among the lower ones too. Among the very poor from lower middle and lower castes, the conditions of marriage may differ. But for those who can afford even among the lowest castes try to follow higher caste marriage customs. Many low caste domestic service provide in Delhi borrow money from their employers and take loans from friends, and family to spend on marriages and incur larger expenses, like their richer caste counterparts and neighbors, more on daughters' marriages than that of sons. This paper does not cover those poor who have no money and for whom amassing food itself is a daily struggle.

Clearly, sons are raised and educated to be earning members who can shoulder the responsibility of looking members who customary obligations towards sisters. On the other hand, daughters are raised as a means to build alliances for upward social mobility, through which parents earn the highest social prestige and religious merit. One might argue that daughters are not customarily given rights in

148 Vatuk, S., "Gifts and Affines in North India", (1975) pp. 155-56 Contributions to Indian Sociology (NS), 9(2):

149 Supra n.111
parental/family property. But it is through the conversation woven around raising them well for others and gaining indirectly in the process that the son-daughter differential is made sense.

This sense of the differential is emboldened through the inability to have any right over one's daughter after her marriage, which is constantly mentioned every one and then. Besides, there are statements, such as how expensive raising of daughters and marrying them off, usually is. The burdensome daughter is increasingly proving to be resource guzzler. She frequently gnaws at the parental assets. Parents want her go remain happy for which both human and material resources are needed. The presence of a brother for a girl is viewed in the light of not only for the performance of mortuary rituals, but also for other family rituals, including those for one's sister.

Fear of violence in married life-bride burning, wife bashing, divorce and the ensuing stigma is an emotional cost is having a daughter. It is this social discourse that charts out a daughter as a social and economic burden, whose upbringing is enormously painstaking and uncertain until she has children, at least a son. The fewer daughters one has the lesser the occasions of standing in attendance for a daughters' conjugal family and drain on one's material resources. Thus, it is thought ideal to have not more than one daughter, especially when not more than two children are seen as an ideal for a couple to have.

3.17 Female Foeticides: Costly Wedding and Rituals of Society

In the present times when money and wealth are accord supreme importance, dowry and gifts at life-cycle rituals are always welcome. It is easy money and showy gizmos are status symbols, and more so when they come as dowry or customary gifts. These symbolize the higher status of wife receivers, and their regular honouring through customary gifts from wife givers. It works as a spiral. Gift receivers enhance their social standing before neighbours and kin through receiving gifts. This in turn
enhances the social standing of gift givers and that of their daughter/sister in her conjugal family. Those castes that practiced bride wealth justify the practice as it brings honour to their daughter in her conjugal family. Well-oiled warmth in ties between the two sets of families is expected to continue. The improved economic standing happens on the side. The seductive attraction of the culture industry facilitated through media and advertisements has skyrocketed Indian, especially middle class wedding expenses. Expert statements though mass media are described as examples by Foucault as falling in the category of relevant ‘surfaces of emergence’ to which people gain access and identify them as relevant. Films like Ham Apke Hain Kaun, Beti No 1, and many TV soaps define for audiences the ‘surfaces of emergency’. They as it were, provide them the meaning of happiness and satisfaction in family life. Such media provide social settings in which a discourse fact are materialized or situated within the field of statements. The discourse that follows the soaps and such films in around Delhi deploy the media reorientation as models for real life situations, especially in matters of marriage. What it means to have a daughter is both reproduced and destabilized through a re-appearance of norms, rituals and discourse of media representations as well of actual everyday practice over time. Human bodies and culture in which they grow come to be blended, so that theoretically separating them is not so easy.

Maximization of advantages in life is seen to come through managing and manipulating resources. If dowry is a resource for one party, it is a loss of resource for another, especially if unequally tilted. It makes sound social and economic sense to be in a position of receiving rather than giving dowry. There is a style of negotiating dowry among middle class Punjabis in Delhi and Punjab and Haryana. It

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150 Ibid
151 Ibid
is commonly said, ‘We want only the girl in barely three clothes’ (teen kapron mein ladki chaahiye). But this is only a manner of speaking and never to be taken literally. Huge dowry following such statements is welcome. In fact, parents prefer to give more to enable their daughter a comfortable time in her conjugal home. Northern India, especially Delhi is notorious for enhanced dowries. Not only large dowries, demanding even larger dowries are what have twisted the desirable ideal of giving and receiving dowry. Dowry communicates love, affection, respect, and honour. Of course, giving dowry is not merely economic cost and loss because it enhances status and honor of both dowry gives and receivers. But when honour is positively correlated and measured through the monetary extent of the dowry gifts, collectively evaluated by the concerned families and other relatives, the economic burdensomeness of the daughter heightens.

There are several event management companies run professionally that specialize in organizing expensive weddings, besides those seen through Bollywood films and TV soaps. There are boutiques and designers for bridal and wedding wear. Their wonderful pieces are very expensive but sat standards to strive for. They set off a competitive extravaganza among those families or households planning weddings to have their event marked by arrangement that outdo others to be remembered for long even after the event. This narrate of arrangements, dresses, invitees, venue, menu, music, dance, etc. are all items that can be arranged by even mangers, a new profession, to add to family honour. Unlike many women professionals who got married around or soon after India’s independence in a rather simple style, many of them in a khadi saree with no dowry, to reasonably good matches.

Young women in smaller towns in north India also held similar views and openly stated so when asked. Dowry is meant to bring happiness and comfort to the married daughter. Punjabis commonly express that a daughter takes/receives all the
time in the proverb, ‘Kuanri Khaaye rotiyan te byayi khaaye botiyan’, literally, unmarried one eats bread and a married one eats you up. She takes even after death; a married daughter’s cremation expenses come from her natal home for her last rites to be duly performed. This signifies that the wedding and dowry are not the end of a series of expenses incurred on a daughter. A Punjabi upper-middle class mother in her sixties used this proverb if a daughter is not given enough gifts, Ghar ki deewaren roti hain, literally, walls of the house weep. This explains the importance of keeping a daughter and her conjugal family happy to keep one’s own house happy, including its material structure (the walls). The gift and the necessity to give gifts for one’s own well-being are resonating here. A gift giving being soon after the betrothal is fixed. The flow of gifts to a daughter’s conjugal family begins from the point of thaka, (booking the boy for the girl in marriage). For a couple of rituals before the wedding, when the two families visit each other, gifts and /or cash in envelopes (lifafa) is presented to the groom’s relatives. Some of the rituals are league Gifts and cash for members of her finance’s house-hold, family and relatives and often for most of the relatives who come for the wedding are provided. The groom is happy with the bride, the barati (the party of people accompanying the groom) for wedding are happy with the feast’ the honour given in all humility by the brides’ family, and /or the accompanying gifts).

The son’s in-laws brought gifts on the first Diwali, Holi, Lohri, Karwa Chaugh, and the birthdays of their daughter, son-in-law, latter’s parents and sister. Such courtesies with humility are extended to generate goodwill for one’s newly married daughter. Such gift-giving disappear in frequently and amount with time, especially after grandchildren are born. The first Lohri of a grandchild is very significant, maternal grandparents are expected to give large amounts of gifts. Some

of the sweets and gifts are distributed among friends, neighbours and mostly among relatives later on. After the grandchildren arrive, the flow of gifts is then diverted to grandchildren. That is expressed in the often emphasized phrase for a mother at a daughter’s birth. The mother is told by many of the women who meet her after a daughter is born to her, ‘Now the days for you to dress up gorgeously are over’ and ‘a daughter’s mother, you now have to start accumulating for her’. These sayings are common even among communities irrespective of whether they have been practicing dowry or not.¹⁵³

A woman’s natal family owes her even until her death. Obviously her parents are usually dead when she is old herself. It is her brother’s who is expected to provide for the expenses for her last rites upon her death with better economic resources adopt sonography in favour of sons to avoid having more than one daughter. It is supported by the constant generation of discussion around two issues. Firstly, the demographic composition of households. Secondly, around marriage and gift-giving practices that makes daughters seem as sexual, social and economic burdens. The usual humble attitude maintained by a daughter’s parents as wife gives also provides a continuous fuel to this discourse. In the power of relations between the bride’s and groom’s families. The former always have to give in and up with any humiliation, indignity, and leaning or direct insults on the part of the latter. The uncertainly regarding tracing the right match and subsequently the cordiality between affinal families is enhanced in urban areas as not know each other over generations, a factor addition to the feeling that a daughter is one too many.¹⁵⁴

Where honour comes through material acquisition, it is reasonable to avoid dispensable costs. People do not mind accepting dowry for their sons. Dowry is easy

¹⁵³ Supra n.2
money, 'get rich quick' formula spreading throughout the society. By the late 1980s, dowry has ceased to be delimited only to certain upper castes. The middle and lower castes considered follow upper castes through dowry as a means of upward mobility in the caste hierarchy. Sanskritisation, to use Srinivas’ concept and its resurgence in recent time in India society includes replication of higher castes in marriage alliances, customs, such as dowry, and other rituals. The custom of dowry, also seen as a means to enhance the family’s and caste’s status, has not only remained limited to the Hindus but has spread among all communities in India irrespective of their class, community and religious background. Its extreme manifestation was seen in the increasing state of dowry related murders. The registered cases are on the rise but unregistered cases are estimated to be several times more. Compares the autonomy of Garhwali women in the hills with those in the plains and finds the loss of women’s agency through their resentment and emulation of high caste plains customary practices in the process of sanskritisation. Proscription of hypogamy and the gift of a virgin to deserving and rightful man is socially constructed. Marriage strategies are also family strategies. Both religious injunctions and the socio-economic are imbricate in the overabundance of supporting mechanisms and thought structures. Dowry marriages, disrespecting of widow remarriage and women’s freedom to initiate divorce, and spending equally on sons and daughters’ nutrition’s, education, etc. combine to make fewer daughters an attractive option in times of a small family norm. Conditions of gender hierarchy seldom mystify conditions of production for parents in general155.

Cultural politics has surrounded the occurrence or non-occurrence of biological events, such as conception, pregnancy, miscarriage, induced abortion and childbirth, operating routinely at the micro political level in the household and the family the ability or inability to reproduce has cultural meanings. Sonography enables

155 Ibid
to achieve or at least have the potential for desirable biological outcomes having culturally coloured meanings and they have a potential to reduce the separation between ‘desirable’ and ‘actual’ outcomes\textsuperscript{156}. And, especially during reputes of time-honoured social arrangements people get secretive among themselves too.

As we have seen that the socio-economic and demographic indicators, which have proved conducive to determine the phenomenon of female foeticide in different parts of India. There are the qualitative and quantitative parameters, which have proved helpful to quantify the various attributes of this burning issue. Apart from above mentioned socio-economic parameters, census commission has also played an important role to feed back to quantify the problem of female foeticide in India. Various stratified samplings of census give preliminary information on this problem in various parts of India. And subsequently, it has become a base for empirical study of the study area.

Keeping in view the configuration of the society, we observe that the Indian society is characterized by the patrichal society. In this perpetual system, the status of women often experienced a declining trend in almost all the strata of society in India. Taking her status at a global level, where we find that the situation is far-better than that of developing countries. Similarly, we observe that the status of women varying from rural to urban and the metropolitan areas. Various case studies of female foeticide indicate that the attitude of the people, more or less same with slight variation. The different attitude of the people may differ in degree, but not in kind. Various pitfalls, prejudicious factors, social bent of mind, which have cumulatively given rise to recurring incidents of female foeticide in the society.

\textsuperscript{156} Ibid

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Keeping in view the eliminating the female foetus, we observe that the various socio-economic and prejudicial bent of mind which affect the gravity of this social evil in different strata of society. Apart from the attitude of the people, new reproductive technology is also become responsible to eliminate the female foeticide.

In our society, the birth of baby is considered as an essential sacrament, and which is an integral part of the life. This type of ‘social web’ has made the society too rigid to move. This ‘rigidness of people’ has blocked their head to think more in broad perspective for the society. They consider their daughter as a burden on their head. They never think that the daughter can be an assessed rather than mere burden on their heads. The traditional functional hierarchy of society has elevated the importance of son in the family. On the contrary, the girl child becomes a social problem, like dowry. On the basis of various empirical studies, which throw an adequate light on gender disparity, large numbers of the parents are of opinion to support this growing anomaly in the society. As we observe from our day today observation for the pump show for dowry, which become a status symbol of the society. It produces a ‘demonstration effects’ on almost all the sections of the society. The results of various studies indicate that the costly wedding and ritual of society are some of factors, which help to develop prejudicial attitude toward ‘female child’. As a result, it affects the whole scenario of female foeticide in Indian society. In addition, dowry is dominant factor which help to develop a prejudicious attitude of the people belong to various strata of society.

Review

To sum up it can be stated that the problem of female foeticide has hardly relieve the tension of civil society. This gruesome act oftenly goes unnoted and unreported. Although the problem is not equivalent in India only but the easy excess

157 Supra n.11
to the various modern sex determination techniques have further complicated the problem at global level also\(^{158}\). It is interesting to note that the male female sex ratio in Indian population has been always an important topic for discussion for demographer, social scientist, women groups and research scholars. A one sight the population of India has increased manifold but simultaneously it could be easily assessed that we have uneven composition of population as compared to the other countries of the world. The U.N. Statically office has categorically pointed out that such ratio in India is undisputedly an exception to the global rule that girls have a better survival rate than boys as they are biologically stronger\(^{159}\). But on the other side we point a high number of missing women in India is resultantly showing a ratio of 945 women to 1000. Basically, the term ‘Missing Women’ denotes the difference between expected and actual number of living females. According the Indian Medical Association it is reported that 5 million female foetus are being aborted every year\(^{160}\).

Recent studies have revealed that in South Asia, we find a strong son preference among all community, religious groups and citizens of varied socio-economic backgrounds. Women work for cooking, cleaning and carrying is hardly considered as work in strict sense of the term\(^{161}\). Therefore, women are perceived as burden. Some people also think that to have a girl means we must have sufficient resourced for dowry which would be required at the time of her marriage. Resultantly, parented feels that the girl is financial burden for them whereas a boy is an asset who would fetch a fabulous dowry for them. The fall in male female ratio could be attributed to neglect of girl child, high maternal morality, sex selective female abortion, female infanticides and change in sex ratio at birth\(^{162}\). It is also to be

\(^{158}\) Supra nn 1-2  
\(^{159}\) Supra n.4.  
\(^{160}\) Supra n.7.  
\(^{161}\) Supra n.1.  
\(^{162}\) Supra n.11
noted that the male preference is generally found among the people who are residing in Northern India whereas it is certainly lesser in South. The declining child sex ratio is assuming an alarming in certain district of Punjab, Haryana and Himachal Pradesh. The difference in social cultural bias in north and south may be attributed to progressive social outlook, education, economic development and high degree of life. It is further pointed out that Pre-natal selection is a new technological to which has almost gains acceptability as something scientific natural and performed by ‘professional concerned’. This has accorded legitimacy to the elimination of child on the basis of its sex. Another important reason for declining male female ratio is that the women’s possible claim in property rights. This could be seen by the fact that adjourn all properties are vested and controlled by male and ownership is also passed to male descendents. This is further, reveal by the fact that women’s labour is under valued as they practices no control over the product of their labour. More so they are not paid at par with men. Women’s freedom is controlled by controlling their sexuality. A premium is placed on the chastity of women, and sexual purity of women is glorified at the cost of controlling their mobility, and freedom.

At international level a number of international conferences have been held from time to time with the purposes of elimination of all forms of discrimination against the girls and women. These are “Convention on the Political Rights of Women 1952”, “The Declaration of the Right of the Child 1959(DRC)”, “Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages, 1962(CCM)”, “International Covenant on Civil and Political Rights, 1966(ICCPR)”, “International Covenant on Economic, Social and Cultural Rights 1966(ICESCR)”, “The Declaration on the Elimination of Discrimination against Women, 1967(DEDAW)”, “Convention on the Elimination of all forms of discrimination

163 Supra n.16
164 Supra n.15

One of the important facts which have emerged from the study and survey by India Today in 2003 is that the most prosperous state of India like Delhi, Punjab, Haryana have the lowest sex ratio. Further, the most prosperous pockets in some cities show the sharpest drop. On the other side the human practice of female foeticides in village, is a perhaps a result of age old belief that a male child is necessary for devolving inheritance. This is so in spite of enactment of loss in favour of women and also sharp rise in the women education. Unfortunately, in spite of the property rights recently conferred on women there is a strong tendency on the parts of the family members that they still either do not offer or they resist any such move on parts of the female to direct interest in the property of their family and parents. In fact, in some parts of Haryana the creation of interest of female in property of her father is seen as a negative and retrogressive step as a disturb a relationship between brothers, sisters and co-laterals. In some parts of the North India certain cases are reported where a female has been killed simply because she failed to give birth to female child. It is also reported that a house wife and her children were setup ablaze because she failed to give a boy. Reports of sale of girl child are also seen in some section of the press.

In short the basic factors which have responsible for female foeticide. These are “Poverty”, “Male Preference”, “Dowry”, “Pressure from husband and relatives”,

165 Supra n.60
166 Supra n.61
167 Supra n.66

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"Stigma attached to women", "Illiteracy", "In security", "Higher Education", "Richness of people".

The attitude of people towards female foeticide is almost set and non wants to take the burden of female child but simultaneously it is also a truth that without female it is very difficult to run a house. Virtually, it is the female which takes care of the house, the children and the whole family. Therefore, this gives to another problem that without female how a house could be set in order. Further a production is at the heart of families and birth of a child is regarded as an important and critical event in the family and has its own substantial, social and individual significant. The women who is enable to give birth is not respected specially, in the India society and generally results in to the dissolution of marriage or other kinds of family problems. Some time it is also reported that the people go for second marries or they have to adopt some child.

In Northern India sisters due have a ritual and social significance. On a number of occasions sisters are required to perform various ceremonies on the occasions of birth of child and marriage in the family like ‘Bhat’, Rakhi etc. In spite of this it is dilemma that there is deep rooted preference for son as against a daughter. One of the reference in Reg Vedas also says “birth of girls be granted else were and here grant a son”. It is also reported that the daughters are comparatively not given proper care as against son that is why often girls with serious illness are neglected with an unstated intension i.e. let her die than be a problem later on when a match for her in marriage in to be looked for. More so the sexuality of girls is close regarded she is likened to an earthen pot that should be neither be dropped nor chipped. Unlike

\[168\] Supra n.76
\[169\] Supra n.83
\[170\] Supra n.87
\[171\] Supra n.119
boys, girls are to be kept under a consent vigil. Wild girls are not good girls. Sometimes such girls have to face dire consequences including death. Moreover the boys in the family keep a constant vigil on the movement of the girls.  

Over the past few decades there has been a change in trend so far as spending money on children education including girls especially in the lower, middle and middle classes. It is also noticed that once the girls are better educated then it further create a problem for the parents to find a suitable match. The age of such girl also gets increased due to education resultantly; the family has to face so many other problems. But the reality remains that the professional girls still have better chances of finding professional grooms and a better living standard. In certain quarters it is thought that to spend money on daughters is like watering other gardens. It is generally, thought that the first parents have spend on education, food, clothing etc. and subsequently, they have to spend on her marriage. This further gives birth to a feeling and the minds of the parents for son preference.

It is interesting to note that in the present times when money and wealth are accorded a supreme importance, dowry and gifts as life cycle rituals are always welcome. It is easy money and showy gismos are status symbols. These symbolize the higher status of wife receiver and their regular owning through customary gifts from wife side. There is mad race of spending more and more on marriages to gain such status symbol. In certain cases it is found that people take loans from various sources to perform good marriages. But if dowry is resource for one party then it must be kept in mind that it is loss of resource for another person. In some of the families in North India it is reported that dowry is being negotiated in table and when the negotiation fails such marriages are not performed.

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172 Supra n.15