

## Original Article

# PERCEPTION REGARDING GENDER BIAS IN TRIBAL COMMUNITY OF TAPI DISTRICT OF SOUTH GUJARAT, WESTERN INDIA

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## ABSTRACT

**Introduction:** Gender bias is strikingly apparent in educational access, employment avenues and representation in the field of politics. In fact violation of the rights of a girl child is rampant and this extends to the whole spectrum from foeticide to neglect to labour to trafficking, rape and eventually ends with her death. This study was conducted to know perception regarding various aspects associated with female gender bias and the awareness among respondents on prevailing schemes for the benefit of women.

**Methodology:** This was a cross-sectional descriptive study conducted in Tribal District of Tapi in 2013 using a semi-structured interview schedule. Data was entered in Microsoft Excel 2003 and was analyzed in Statistical Package for Social Sciences (SPSS) software version 16.

**Result:** It was remarkably observed that 121(80.7%) has no gender preference for their 1<sup>st</sup> child, 17(11.3%) participants has female child preference while 12(8.0%) has male child preference for their 1<sup>st</sup> child. 137(91.3%) participants were aware of the fact that the repeated prenatal sex diagnosis and abortions are detrimental to the mental and physical health of a woman.

**Conclusion:** Most of the participants have no gender preference as first child. Good awareness was found regarding the prenatal sex determination test. Most common answer for the desire for male child was to run the family tree.

**Keywords:** Female foeticide, gender bias, tribal population, pre-natal sex determination

## INTRODUCTION

The systematic undervaluation of women is visible in terms of lower status of the girl child; their unwantedness; practices as dowry payments; lower social status of parents of brides; lifelong responsibility of parents even after marriage; fear of sexual exploitation and abuse; disdain upon arrival of girl child.<sup>1,2,3,4</sup>

Gender bias is strikingly apparent in educational access, employment avenues and representation in the field of politics. In fact violation of the rights of a girl child is rampant and this extends to the whole spectrum from foeticide to neglect to labour to trafficking, rape and eventually ends with her death.<sup>5</sup>

Studies are lacking among the tribal community whether with passage of time gender bias has percolated to this community or not? This study attempts to explore this very issue. The issue of gender bias is unique to Asian countries and threatens the very survival of our existence and encourages crimes against women. Thus it becomes crucial that the primordial preventive steps be taken to ensure that this issue does not become a challenge among tribal in the coming era.

Tapi is a predominantly tribal district located in the South Gujarat, a Western state of India. As per Census, 2011

though the overall sex ratio of Tapi was 1007 females per 1000 males, child sex ratio (0-6 years) of the same was found to be 953 females per 1000 males. The Present study aims to explore the perceptions on gender bias and related issues amongst the tribal population of Tapi district of Gujarat.

## METHODOLOGY

This was a cross-sectional descriptive study conducted in Tribal District of Tapi. Tapi district is situated 65 km east to Surat district. The present study was conducted randomly in the tribal population of the five talukas of Tapi District in 2013.

The sample size was n=150, calculated with help of Open Epi software by using prevalence of gender bias, P= 0.34 (from a pilot study conducted by our department in 2008), allowable error, d=10% (precision), considering this our Sample size 149 at 1% of  $\alpha$ .

Multistage sampling method was used for selection of talukas, villages, PHCs and sub centres. 15 eligible individuals were selected from each sub centre area (approximately 150 totals). Only one eligible individual was selected from each household by simple random sampling. These would comprise of age more than 18 years of age and those respon-

dents giving informed written consent would be included in the study.

A semi-structured interview schedule was utilised for the purpose of data collection.

We obtained approval from the Institutional Ethical Committee (IEC) of Surat Municipal Institute of Medical Education and Research (SMIMER) Surat for conducting this study.

## RESULTS

The total numbers of participants enrolled in the study were 150.

**Table: 1 Socio-demographic profile of the participants (n=150)**

Socio-demographic profile	Frequency( % )
<b>Gender</b>	
Female	64(42.7)
Male	86(57.3)
<b>Education</b>	
Illiterate	6 (4)
Up to Primary	14 (9.3)
Up to Secondary	35 (23.3)
Up to Higher Secondary	32 (21.3)
Up to Graduate	36 (24.0)
Up to Post graduate	27 (18)

The table 1 shows that out of 150 respondents, 86(57.3%) were males and 64(42.7%) were females. It was observed that 80 (53.3%) of the respondents were in the age group of 18 to 30 years of age. All 150 respondents were belonging to Schedule Tribe, from that 42.3% belonged to Gamit caste. It was observed that 35(23.3%) of the participants were educated up to secondary class, 32(21.3%) of the participants were educated up to higher secondary class and 36(24.0%) were educated up to graduate level.

**Table: 2 Preferences of the participants for Gender of their first child**

Variables	Freq (%)
<b>Gender preferences for first child-If Given Choice (n=150)</b>	
Female	17 (11.3)
Male	12 (8.0)
No Preference	121 (80.7)
<b>Reasons for Choosing a Boy as 1<sup>st</sup> Child (n=12)</b>	
Nothing specific	3 (25.0)
Boys Propagate family	9 (75.0)
<b>Preference for Gender of 2<sup>nd</sup> child, if 1<sup>st</sup> Child is Male (n=150)</b>	
Female	55 (36.7)
Male	2 (1.3)
No Preference	93 (62.1)

From table 2, It was remarkably observed that 121(80.7%) has no gender preference for their 1<sup>st</sup> child, 17(11.3%) participants has female child preference for their 1<sup>st</sup> child and 12(8.0%) has male child preference for their 1<sup>st</sup> child. The most common reason was that the male child will run family 92(61.3%).

**Table 3: Perception regarding Pre natal sex determination (n=150)**

Variables	Freq (%)
<b>History of Prenatal sex Determination Tests</b>	
Yes	4 (2.7)
No	142 (94.7)
Don't know	4 (2.7)
<b>Repeated prenatal sex diagnosis and abortions are detrimental to the mental and physical health of a woman</b>	
No	6 (4.0)
Yes	137 (91.3)
Don't know	7 (4.7)
<b>Suggestions</b>	
None	48(32)
Run Awareness Programme/Education on the matter	39(26.1)
Enforce Strict Act on the matter	50(33.2)
Overall Gender Equality should increased in nation	10(6.7)
Prohibiting Dowry strictly	3(2.0)

According to table 3 it was observed that 142(94.7%) had not undergone for prenatal sex determination. It was observed that only 4(2.7%) participant had undergone abortion. 137(91.3%) participants were aware of the fact that the repeated prenatal sex diagnosis and abortions are detrimental to the mental and physical health of a woman.

Out of 150 participants 102(68%) had knowledge about janani suraksha yojna, 96 (64%) chiranjivi yojna, 105 (70%) KKY, while only 39(25%) had some knowledge about NVB.

It was observed that 44.7% participants didn't know about the consequences of number of males exceeding number of females.

It observed that 79.3% participants were of opinion of allowing females to work on a professional basis. Out of 150, 86.7% participants believed in giving same nutrition to both male and female child. It was also observed that 92.7% participants had no gender discrimination in health care seeking in their family.

## DISCUSSION

The study reveal that 121(80.7%) of the respondents had expressed their contentment with no gender preference. Of the remaining the majority had expressed their desire for a female child 17(11.3%) followed by a male child 12(8.0%).

Studies have reported that in the absence of manipulation, both the sex ratio at birth and the population sex ratio are remarkably constant in human populations and deliberate manipulations result in the distorted sex ratio as observed in India.<sup>1</sup>

When our couples, including the women, are asked to imagine a hypothetical situation of having complete freedom to choose the number and sex composition of their children, among those wanting three children, the overwhelming response is for two sons and one daughter. Similarly, some who indicate that they would like to have only two children prefer at least one of them to be a son. If, however, the two children turn out to be girls then they would almost certainly opt for a third child in the hope that it would be a boy and would try all means to ensure that it is either a boy or would resort to selective sex abortion.<sup>6,7</sup>

A key factor driving gender inequality is the preference for sons, as they are deemed more useful than girls. Boys are

given the exclusive rights to inherit the family name and properties and they are viewed as additional status for their family. Another factor is that of religious practices, which can only be performed by males for their parents' after life. All these factors make sons more desirable. Moreover, the prospect of parents 'losing' daughters to the husband's family and expensive dowry of daughters further discourages parents from having daughters.<sup>8,9</sup> The observance of the fact that a mere 3.3% of the respondents are opining that they might go in for prenatal sex determination for their third child, in case their first two children are girls is quite an encouraging sign.

However we must also point out to the fact that feminists have taken widely divergent positions on the morality of widespread gender screening through increasing availability of Ultrasonography and amniocentesis and selective abortion of normal female fetuses in many countries including India.<sup>10</sup> A disturbing finding is the reporting of the fact that even in 2007 sex-selected abortions are being practiced among all communities despite enactment of laws prohibiting prenatal sex determination.<sup>11</sup>

It has been shown that improving women's malnutrition, gender equality, empowerment and ending violence against women are associates with her nutritional status.<sup>12</sup>

The aforesaid observations encouragingly point out that almost all 92.7% of the respondents did not subscribe to the practice of differentiating on the offering of treatment facilities to their daughters versus their son. This is indeed a welcome development as a number of studies have shown that unequal access to health care is the most important factor of higher female mortality.<sup>13, 14, 15</sup>

The study reveal a better picture when it comes to opinions of giving women the right to work on a professional basis and the non-discriminatory attitudes in this sector 79.3% also lag behind the freedom to their education.

## CONCLUSION

Majority of the participants have no gender preference as first child as well as no discrimination in relation to health, nutrition, education etc. Good awareness was found regarding the prenatal sex determination test and government scheme. Most common answer for the desire for male child

was to run the family tree, though everyone was aware that it is not possible to propagate a family race without the female child either. Most of the participants believe that if the number of male or female child increases than their counterparts, this will be detrimental to the society.

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