



## GENDER EQUALITY AND WOMEN EMPOWERMENT

**Dr. M. Nageswara Rao**

Lecturer in English, Sri Y.N College (A), Narsapur-534275.

**T. Delsly**

Lecturer in English, Sri Y.N College (A), Narsapur-534275.

**ABSTRACT**

Women Empowerment is now considered a human rights issue. Gender inequality cannot be fully eliminated merely by the legal and administrative measures. The educated people should develop a national consciousness of the positive impact of gender equality. There is a need for changes in perception towards women. The human society would be most advantaged only if women are treated equally and are not deprived of their rights. Let us hope for a society where women are not discriminated because of their gender. Equality should be for all, regardless of gender, age, race or nationality. Everyone should command the same respect, and enjoy the same opportunities. That means respecting women without qualification and never thinking or treating them in a disrespectful way.

Gender equality and women's empowerment are two sides of the same coin. Both have multiple dimensions that together yield a wide variety of indicators. Gender inequality refers to unequal treatment or perceptions of individuals wholly or partly due to their gender. It arises from differences in socially constructed gender roles whereas empowering women to participate fully in economic life across all sectors is essential to build stronger economies, achieve internationally agreed goals for development and sustainability, and improve the quality of life for women, men, families and communities.

**KEYWORDS :**

There is a report that provides information on progress in India towards the twin goals of gender equality and women's empowerment determinants of selected indicators of gender equality and women's empowerment; and associations of women's empowerment with selected health and nutritional outcomes. Over the past decade, gender equality and women's empowerment have been explicitly recognized as key not only to the health of nations, but also to social and economic development. India's National Population Policy 2000 has empowering women for health and nutrition as one of its crosscutting strategic themes. Additionally, the promotion of gender equality and empowering of women is one of the eight Millennium Development Goals (MDG) to which India is a signatory. The pairing of the two concepts of women's empowerment and gender equality into one MDG implicitly recognizes that gender equality and women's empowerment are two sides of the same coin: progress toward gender equality requires women's empowerment and women's empowerment requires increases in gender equality as shown. Since gender inequality and women's disempowerment occur in all the different domains in which women and men interact and function, both concepts are multi-dimensional; consequently, they give rise to a large number of potential indicators. Indicators of gender equality/inequality are typically designed to compare the status of women and men on particular characteristics of interest; whereas, by definition, indicators of empowerment/ disempowerment tend not to be relative. Instead, indicators of empowerment are designed to measure roles, attitudes, and rights of women and sometimes men.

In order to measure gender equality and women's empowerment, the concepts need to be clearly defined and their hypothesized associations with each other and health outcomes discussed. In common parlance, the terms gender and sex are often used interchangeably; however, they are distinct concepts. Whereas, sex of individuals is largely determined by biology, their gender is socially constructed and comprises the roles, rights, and obligations that attach to them on the basis of their sex. Kishor (2006) identifies three important aspects of gender namely: a) Gender tends not to be value neutral. The roles, rights, and obligations assigned to each sex are not just different, but also unequal with male roles and rights generally being valued more highly than female roles and rights. b)

Gender involves differences in power, both power to and power over. The concept of power to encompasses legal and informal rights, access to resources, and pursuit of knowledge and personal

goals, and cuts across most domains of human functioning, including familial, cultural, and institutional domains. Power over refers to control over societal and household resources and decisions, cultural and religious ideology, and one's own and others' bodies. Importantly, men tend to have greater power than women, and, in some domains, even have power over women. c) Gender is not static or immutable. Being socially constructed, gender roles, rights, and expectations can change over time and across geographical space as societal needs, opportunities, and customs change. As a result of (a) and (b), inequalities based on gender, as also the disempowerment of females, are pervasive in most societies, particularly patriarchal ones such as in India. Gender-based differences in power and resource-access have consequences for the quality of life of the population, including its health.

The Gender affects health outcomes through male and female differences in roles, access, and power, and sex differentially affects the health of women and men because of biologically determined physiological and genetic differences that manifest in differences in 6 needs and vulnerabilities. While the type of health care needed can vary by sex, whether, for example, the type of care needed can be accessed is affected by gender, empowerment, and sex. Gender-based inequalities translate into greater value being placed on the health and survival of males than of females. In India, examples of health and population indicators that are driven by gender differences in the perceived worth of males and females include sex ratios at birth, infant and child mortality by sex, and low ages at marriage for women. Further, at the household level, disempowerment of women results in their lowered access to resources such as education, employment, and income, and limits their power over decision making and freedom of movement. Men's power over women can be measured, on the one hand, by assessing the level of women's and men's agreement with norms that give men the right to exercise control over women and, on the other hand, by measuring the extent to which women are subject to spousal violence.

This report examines these and related indicators to provide a snapshot of gender equality and levels of women's empowerment in India. Specifically, it presents data on multiple indicators drawn from the 2005-06 National Family Health Survey (NFHS-3) to examine the levels in the codependent concepts of women's empowerment and gender equality in India and its 29 states. Also, in keeping with the third aspect of gender noted above, i.e., the ability

of gender to change and adapt, trends over time in key indicators of gender equality and women's empowerment are also discussed. The discussion of trends is based on data from NFHS-1 (1992-93) and NFHS-2 (1998-99), in addition to NFHS-3 data. The report also examines the determinants of specified indicators and their linkages to selected health and nutritional outcomes. In addition to this chapter, the report has 11 other chapters. Each of the first nine of these chapters is organized around a set of related indicators of gender equality and/or women's empowerment. Chapter 11 examines gender differences in children's immunization and child and adult nutrition, and shows how these indicators and women's contraceptive use are related to selected indicators of women's empowerment. Chapter 12 presents some conclusions. At the end of most chapters, appendix tables show key indicators discussed in the chapter by state and for the eight cities for which representative indicators can be estimated. The indicators for these cities are also provided separately for the slum and non slum areas in these eight cities. The information in this report should be treated as complementary to the gender-related information in Volume 1 of the NFHS-3 National Report, especially in its Chapters 14 and 15.

Gender inequality in India refers to health, education, economic and political inequalities between men and women in India. Various international gender inequality indices rank India differently on each of these factors, as well as on a composite basis, and these indices are controversial. Gender inequalities, and its social causes, impact India's sex ratio, women's health over their lifetimes, their educational attainment, and economic conditions. Gender inequality in India is a multifaceted issue that concerns men and women alike. Some argue that some gender equality measures, place men at a disadvantage. However, when India's population is examined as a whole, women are at a disadvantage in several important ways. Gender inequality refers to the gender based inequality against women. Women are often denied their social, cultural, economic, and political rights leading to a decline in the condition of women. Gender inequality is when people of all gender do not get equal privileges. It refers to the unequal treatment of people belonging to various genders. It refers to an unjust situation when women are devoid of their right to be treated equally with their male counterpart.

Gender inequality refers to a situation: when men and women are not treated equally, or where men enjoys certain privileges over women, or where men misuses their dominant position to establish control over women, or when the voices of women are discouraged, or when women do not enjoy equal right for education, or when the good performance of women is unjustly ignored.

During the last 50 years, there is a change in perception towards women. Constitutionally, the women of today enjoy similar opportunities with men. The participation of women in the mainstream workforce is continuously increasing. They are largely employed in banking, hospitality, health care, and other service sector industries. However, they have minimal presence in manufacturing and engineering industries. In comparison to women, the top managerial posts are generally held by men. This may be due to the fact that men who are already at high position prefer to appoint men at higher positions. Jobs that require physical strength are also mainly dominated by men. In general, men are believed to be physically stronger than women.

Gender inequality is most commonly found at workplaces. Very often they are denied of fair pay or equal pay. Even in corporate environment women have to face various challenges. The Glass ceiling effect is also believed a reason for inequality against women. Glass ceiling effect refers to the invisible barrier that obstructs a woman to rise to higher position in spite of having merits on the basis of education, ability and past records. Even women who work outside home and earn a good income are expected to spend time with children and complete the household works.

The feminization of poverty also reflects the indifferent treatment

that women face throughout the world. It is unfortunate that a woman constitutes a greater proportion of world's poor. Women Empowerment is now considered a human rights issue. Gender inequality cannot be fully eliminated merely by the legal and administrative measures. The educated people should develop a national consciousness of the positive impact of gender equality. There is a need for changes in perception towards women. The human society would be most advantaged only if women are treated equally and are not deprived of their rights. Let us hope for a society where women are not discriminated because of their gender. Equality should be for all, regardless of gender, age, race or nationality. Everyone should command the same respect, and enjoy the same opportunities. That means respecting women without qualification and never thinking or treating them in a disrespectful way. Finally it is concluded that unless and until we achieve gender equality and women empowerment our nation would not be developed.

#### References:

1. Mason, K.O. 1986. The status of women: Conceptual and methodological issues in demographic studies. *Sociological Forum* 1:284-300.
2. Miller, B. D. 1981. *The Endangered Sex: Neglect of Female Children in rural North India*. Ithaca: Cornell University Press.
3. Das Gupta, M. 1987. Selective discrimination against female children in rural Punjab, India. *Population and Development Review* 13(1): 77-100.