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Indicators of Gender Disparity in Health in India

KEYWORDS: Gender Disparity, Health Policies, Sex Ratio.

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ABSTRACT *The present study examines the indicators of gender disparity in health in India by utilising census data pertaining to the two census years 2001 and 2011. The results of the study noted that sex ratio has increased during the period between 2001 to 2011. On the other hand, the indices of total fertility rate, infant mortality rate and death rate have been found declining during the period under study. On the basis of the findings, the study suggested that appropriate public policies in the direction of providing basic amenities to the weaker sections of the society must be implemented to fill the rising gender gap.*

Introduction

Health represents the general condition of a person's mind and body, usually indicating the state of being free from illness, injury or pain. The World Health Organization (WHO) has defined health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. Health influences individual's ability to fulfill his or her potentials in the society. It has been found in many societies that gender inequality has been on decline in terms of education and employment. However, the gender disparity in health continues to plague many societies today. The existence of health disparity implies that health equity does not exist in many parts of the world. Equity in health refers to the situation whereby every individual has a fair opportunity to attain their full health potential, and that no one should be denied from achieving this potential.

In India first national health policy was formulated in 1983, since then numbers of policy initiatives have been taken by the government of India to improve the health status of population in India. Over the years, health research activity in the country has been very limited. In the Government sector, such research has been confined to the research institutions under the Indian Council of Medical Research, and other institutions funded by the States/Central Government. Moreover, the efforts made over the years for improving health standards have been partially neutralized by the rapid growth of the population. It is well recognized that population stabilization measures and general health initiatives, when effectively synchronized, synergistically maximize the socio-economic well-being of the people. In addition, Socio-cultural and economic factors continue to inhibit women from gaining adequate access even to the existing public health facilities.

The present paper is organised as follows. After discussing the conceptual issues related with the health and health disparity in Section I, Section II studies the broad review of literature related to the theme of the study. Section III gives datatbase and materials. Section IV highlights the results and discussion. Section V concludes the study and gives policy options.

Section II

Review of Literature

A number of studies have focused its attention on indicators of gender disparity in health in India along with its various states. (Bhan; 2001, Rustagi; 2004, Ashraf and Aeron; 2005, Visaria; 2008, Bahadur; 2010,). A.K. Tiwari 2013 in his national level study on health disparity found that there is significant correlation for gender bias in child mortality, child nutrition and composite index for gender bias. This shows that gender bias in health and nutrition may affect the inequality in life of expectancy. The study also noted a significant gender bias against female (both children and adults) in most states of India. On the basis of 21 selected health indicators, Nilanjan Patra 2003 in his study showed that there is ample evidence of varying level of gender gap exists in all the states of India. It is found that the gender gap in various health outcomes are not much related to the gender gap in various indicators of health-seeking behaviour. However for the girl children's health achievement, the indicators of health-seeking behaviour are significantly related to the indicators of health outcome. It is also shown that any consistently robust pattern of gender bias against girl children in child health is *not* present in India. But there is a consistent pattern of girl children's absolute health achievement.

Section III

Database and Materials

The data for the present study have been collected pertaining to the period between 2001 to 2011. The study has utilised various secondary data sources viz., Census reports, books, journal etc. In order to examine the indicators of health disparity in India, sex ratio, total fertility rate, infant mortality rate and death rate have been analyzed. Simple statistical tools like percentages and ratios have been calculated to make inferences about the data collected.

Section IV

Results and Discussion

The present study is an attempt to examine the major indicators of gender disparity in India in terms of selected health indicators viz., sex ratio, total fertility rate, infant mortality rate and death rate. The present section is devoted to study the results and discussion of the proposed study.

Rural-Urban Sex Ratio in India between 2001 and 2011

Sex ratio has been defined as the number of females per thousand males. Table 1 gives rural-urban sex ratio in India

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during the period 2001 to 2011. The results of the table 1 revealed that sex ratio in India have improved though marginally from 933 per thousand to 943 per thousand during the period 2001 to 2011. The residence wise sex ratio noted that the number of females with respect to 1000 males in the rural areas has increased marginally from 946 to 949 during the period 2001 to 2011, whereas the respective number increased from 900 to 929 in the urban area during the same period.

Table 1: Trends in Sex Ratio by Residence, India, 2001 to 2011

Year	Total	Rural	Urban
(1)	(2)	(3)	(4)
2001	933	946	900
2011	943	949	929

Source: Census of India Reports, 2001 and 2011.

Total Fertility Rate in India

Total fertility rate shows the number of children born to a woman if she were to live to the end of her child bearing years and bear children at each age in accordance with prevailing age-specific fertility rates. It is seen in table 2 that total fertility rate has declined from 3.1 in 2001 to 2.4 in 2011. Almost similar trends of TFR have been noted among rural and urban population in the country. However the rate of decline is registered higher in rural areas compared to urban areas during the period under evaluation.

Table 2: Trends in Total Fertility Rate (TFR), India

Year	Total Fertility Rate(TFR)		
	Rural	Urban	Combined
(1)	(2)	(3)	(4)
2001	3.4	2.3	3.1
2002	3.3	2.2	3.0
2010	2.8	1.9	2.5
2011	2.7	1.9	2.4

Source: Census of India, 2001 and 2011.

Infant Mortality Rate by Sex in India

Infant Mortality Rate is defined as the death of child before the age of one year. It is also recognized as the most sensitive index of general health and sensitization level of community. It increases due to malnutrition and diseases like diarrhea, pneumonia, infections and parasitic disease. Sex-wise trends of infant mortality rate in India are presented in Table 3. According to estimates, the Infant Mortality Rate (IMR) in females at national level was 68 per 1000 live births in 2001 which has declined to 46 in 2011. On the other hand, the respective figure for males declined from 64 per 1000 live births to 43 in 2011.

Table 3: Trends in Infant Mortality Rate (IMR) by Sex and Residence, India, 2001 to 2011

Year	Female	Male	Total
(1)	(2)	(3)	(4)
2001	68	64	66
2007	56	55	55
2008	55	52	53
2009	52	49	50
2010	49	46	47
2011	46	43	44

Source: Registrar General of India, Ministry of Home Affairs, Govt. of India.

Death Rate in India

Death Rate by Sex and Residence- India

Death rate show the ratio of deaths to the population of a particular area or during a particular period of time, usually calculated as the number of deaths per one thousand people per year. Sex-wise figures of death rate in India are given in Table 4. It can be seen from Table 4 that death rate with respect to females has decreased from 8 to 6.3 during 2001 to 2011. Whereas, for males the respective figure decreased from 8.8 to 7.8 during the same period.

Table 4: Trends in death rate by sex and residence in India, 1981 to 2011

Year	Sex								
		Rural			Urban				
	Total	Male	Female	Total	Male	Female	Total	Male	Female
2001	8.4	8.8	8	9.1	9.5	8.7	6.3	6.7	6
2011	7.1	7.8	6.3	7.6	8.4	6.9	5.7	6.3	5

Source: Registrar General of India, Ministry of Home Affairs, Govt. of India.

Rural-urban trends in death rate showed that death rate remained less in the urban areas due to better medical facilities. On the other hand the death rate has decreased form 8.7 in 2001 to .9 in 2011. Thus country has made significant achievement in lowering the death rate in both urban and rural areas.

Expectancy of Life

Life expectancy is regarded as a statistical measure of how long a person or organism may live, based on the year of their birth, their current age and other demographic factors including sex. It is calculated for individuals at the time of birth.

Table 5: Trends in Life Expectancy at Birth by Sex in India, 2001-05 to 2006-10

Period	Total		
	Total	Male	Female
(1)	(2)	(3)	(4)
2001-05	64.3	63.1	65.6
2005-09	65.7	64.3	67.2
2006-10	66.1	64.6	67.7

Source: Registrar General of India, Ministry of Home Affairs, Govt. of India.

It is seen from Table 5 that expectancy of life at birth in India has not shown any drastic change both for males and females during the studied period. Moreover, the trends in life expectancy have found favourable for females as compared to their males counterparts.

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Section V
Conclusions and Policy Options

The paper attempts to examine the various indicators of gender disparity in health in India by utilizing census data pertaining to the period 2001 to 2011. The results of the study noted that sex ratio has increased both in rural and urban areas during the period under study. On the other hand, the indices of total fertility rate, infant mortality rate and death rate have been found declining during the period under study. In addition, the trends in life expectancy have found favourable for females as compared to their males counterparts. On the basis of the findings, the study suggested that appropriate public policies in the direction of providing basic amenities to the weaker sections of the society must be implemented to fill the rising gender gap.

REFERENCE Ashraf S. and Aeron A. (2005). "Reproductive Health and Empowerment: Expectations and Experiences of married Women", Labour and Development, Vol.11, No. 1, PP. 117-135. | Bahadur, A. (2010). "National Rural Health Mission: A Falling Mission", Indian Journal of medical Ethics, Vol.7, No. 3, pp 170-172. | Government of India (2011). Census of India, New Delhi, India. | www.censusindia.gov.in/vital -statistics/vital rates .aspx | Government of India (2011). Faster, Sustainable and More Inclusive Growth: An Approach to the Twelfth Five Year Plan (2012-17), Planning Commission, New Delhi. | National Health Policy, 2002, http://mohfw.nic.in/showfile.php?lid=2325 | Tiwari, A.K. (2013). Gender Inequality in Terms of Health and Nutrition in India: Evidence from National Family Health Survey-3, Pacific Business review International, Vol. 5, Issue 12, pp. 1-11, | Visaria, L. (2008), "Violence against Women in India: Is Empowerment a Protective Factor?" Economic and Political Weekly, Vol. XLII, No.48, pp.60-66. | World Health Organization. (2007) Maternal Mortality in 2000: Estimates Developed by UNICEF and UNFPA. Geneva, 4:16. |