Challenging Social Norms and Strengthening Gender Parity: The Ambition of Inclusive India

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Objective: To assess the recent trends in changing Sex Ratio at Birth (SRB) in India and the policies to address gender imbalances.

Introduction: The challenge of gender disparity at birth through a skewed sex ratio is not uncommon in low- and middle-income countries. With a preference for male child and a history of unlawful female infanticide is also not unusual. The Sex Ratio at Birth (SRB) and Child Sex Ratio (CSR) are few critical indicators to observe gender balance in the countries. India, not immune to the ingrained social norms for preferred male child at birth, has been implementing various policies and programs to achieve gender parity and women empowerment. Although multi-sectoral efforts have been adopted in domains of education, health, economic opportunities, and social inclusion for women, significant efforts are warranted to achieve the cultural change.

Methods: A systematic secondary data analysis was conducted using data from the National Family Health Survey, Govt of India from 2014 to 2020, to analyse the gender disparity at birth. National level analysis is performed to see the country-wide prevalence of SRB and CRB through different states of the country. In addition, secondary data analysis is performed to seek various measures adopted towards attaining the gender parity and women empowerment.

Results: While the Sex Ratio at Birth (SRB) has shown improvement from 919 in NFHS-4 to 929 in NFHS-5, indicating an increase of 10 points, few states recorded the exception. Analysis also suggests a notable proportion of women may still be resorting to pre-natal sex selection, in select geographies.

Conclusion: The finding indicates the ongoing challenges in addressing gender imbalances and can contribute to discussions on policy interventions and initiatives aimed at improving gender equality. Results also documents

Keywords: Gender parity; Gender discrimination at birth; Sex ratio at birth; Gender imbalance; Female foeticide; Gender policies.

difference of gender parity amongst different states in the country. This signifies the need for targeted intervention towards the vital issue. Nonetheless, consistent, more inclusive and innovative approaches are key to achieve the behavioural and cultural change toward gender equality.

Introduction

Female gender discrimination is a global challenge, with India being no exception. Despite continuous efforts over past years, the distorted sex ratio is showing worsening tendencies over various parts of the country. The preference for sons over daughters, combined with advancements in sex determination techniques, has led to imbalanced sex ratios at various geographies. In countries like China and India, the cultural preference for sons with a combination of unauthorized use of sex determination techniques has resulted in highly skewed sex ratios [1]. If not addressed timely according to the World Bank, by 2031 India may have 936 females per 1,000 males, lower than the sex ratio in 1951 of 946 females per 1,000 males [2]. The United Nations defines sex selection as a key harmful practice and has targeted it against the Sustainable Developmental Goals [3]. The definition of sex ratio (male to female ratio of a population) can be read different for India than some other countries. While it represents internationally as the number of males per 100 females, in India, it is denoted by the number of females per 1,000 males [4], which serves as a vital indicator for the socio-economic development in a particular region [5]. The sex ratios can be expressed in various forms: Sex Ratio at Birth (SRB), Child Sex Ratio (CSR) and sex ratio of the general population. SRB is defined as the ratio of male live births per 100 female births and is supposed to fall in the range of 105-107 (952 female births per 1,000 male births) under normal circumstances considering biological variations [4]. The CSR is defined as the sex ratio in a specific age group, typically 0-6 or 0-4 years. (United Nations population Fund 2013). A key two-decade study of 24 European countries showed a sex ratio of 105-107 with a median figure of 105.9. This figure has since been used as a baseline for calculating deviations in the sex ratio [6]. Higher than normal ratios as high as 130 males is becoming a source of concern in different parts of Asia [7]. Although women have a biological survival advantage over men, however, a combination of “mortality and natality inequality” has adversely affected the CSR and SRB in the country [8,9]. SRB in India has become more masculine in the recent decades than its natural level. The origin of this distorted rise in sex ratio is linked to the introduction of sex-selective abortions in many Asian countries specifically followed the arrival of ultrasound and amniocentesis technologies in the late 1970s, which were legally permitted to detect genetic diseases pre-nataly but also aimed to determine the sex of the child in advance and thereby eliminate female foetuses [10,11]. A hidden market for sex selection became more rampant as some health providers also openly started advertising their services [10]. To curb this malpractice, in 1994, the Government introduced the Prenatal Diagnostics Techniques Act (PNDT) which provides a provision to penalizes healthcare workers for revealing sex of the fetus to expectant parents. In 2003, with advancement to technologies that allowed gender selection even before conception became available, the act was amended to Prenatal Conception and Prenatal Determination Act (PC-PNDT) [11]. However, abiding these laws are more dependent on the behaviour of service providers and the service recipients. The concept of daughters as “more expensive” has been observed throughout the history [12]. It was observed that illegal abortions outnumber legal ones [12]. Son preference has long been a deep-rooted cultural phenomenon which has been observed throughout Asia, Middle East, and North Africa [6]. India follows several patriarchal traditions which are significantly ingrained amongst people belonging to different parts of the country. Sons are preferred because of their higher wage-earning capacity and are generally recipients of family inheritance. Girls are often considered to be less profitable and an economic burden to the family because of the dowry system. Also, after marriage they typically become members of the husband’s family and cease all responsibilities for their parents in illness and old age [6,7]. In addition to these factors, consideration of security and safety of the un-married daughter could also lead to daughter aversion. These factors lead to ‘disvalue’ of the female child. Furthermore, in some religious households, religious and cultural customs are to be performed only by the son, such as those upon parents’ death (burial and lighting the funeral pyre) along with ancestor worship [13]. Such values may be considered sentimental or ritual. Such values may vary across cultural, social, and economic setting, which is evidenced by the wavering sex ratio in different parts of the country.

India has implemented various policies and programs aimed at promoting gender parity and women’s empowerment. These initiatives span across different sectors, from education and health to economic opportunities and social inclusion. Some of the key policies and programs in India include:

Beti Bachao, Beti Padhao (BBBP) Scheme [14]: Launched in 2015, this initiative aims to address the declining CSR and promote the value of girl child. It combines efforts to prevent gender-biased sex selection, ensure survival and protection of the girl child, and encourages their education.

Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA): (Mahatma Gandhi NREGA | Ministry of Rural Development, Government Of India, n.d.): This flagship program guarantees a certain number of days of employment to rural households, with a focus on women’s participation. It aims to empower women economically and enhance their decision-making power.

Pradhan Mantri Matri Vandana Yojana (PMMVY) [15]: Introduced in 2017, this program provides financial support to pregnant and lactating women to improve their health and nutrition during pregnancy and after childbirth.

Sukanya Samriddhi Yojana [16]: This scheme encourages parents to save for the future education and marriage expenses of their girl child by providing a government-backed savings scheme.

Swachh Bharat Abhiyan (Clean India Campaign) [17]: While not exclusively a women’s empowerment initiative, this campaign acknowledges the role of women in maintaining hygiene and sanitation and promotes women’s dignity and safety through improved toilet facilities.

National Skill Development Corporation (NSDC) [18]: NSDC’s initiatives focus on skill development and vocational training, helping women acquire skills that enable them to enter the workforce and become economically independent.

Legal Measures [19]: Various legal provisions have been enacted to protect women’s rights, such as the Protection of Women from Domestic Violence Act, the Sexual Harassment of
Women at Workplace (Prevention, Prohibition and Redressal) Act, and amendments to the Criminal Law to address sexual offenses more effectively.

Women’s Self-Help Groups (SHGs) [20]: These groups have played a significant role in rural development and women’s empowerment. They provide financial assistance, training, and support to women to engage in income-generating activities.

Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (SABLA) [21]: This program targets out-of-school adolescent girls by providing them with life skills education, nutrition, and health services to empower them for a better future.

Educational Initiatives: Various initiatives have been launched to improve girls’ education, Such as the Sarva Shiksha Abhiyan [22]. And the National Scheme of Incentive to Girls for Secondary Education [23].

Women in Politics: [24] Reserved seats for women in local government bodies (Panchayats and Municipalities) have increased women’s participation in decision-making at the grassroots level.

While these policies and programs are steps in the right direction, there is still work to be done to achieve comprehensive gender parity and women’s empowerment in India. Country’s sex ratio at birth has declined even as per capita income increased nearly 10 times over the last 65 years, according to an India Spend analysis of government data [25]. Studies have shown that those families with higher incomes and women with education tend to sex select more than those with lower incomes and lesser education. A sharp decline in the girl-to-boy sex ratio for the second order birth was also observed when the first-born was a girl. These studies point to a disturbing trend that the richer and more educated one is, the more they tend to sex select or discriminate against daughters [25-27]. These factors result in the sex-selective abortion. One in nine deaths of females under 5 years has been attributed to post-natal sex selection which is usually due to the negligence of the girl child, called the “post-natal discrimination” which is another factor that causes deficit in female child [3]. India now accounts for nearly one third (46 million) of the world’s 142 million missing women over the past 50 years, according to the state of World Population Report 2020 report by UNFPA. Such sex differentials for infant mortality in long term, imply a superfluous mortality for females that results in discriminations in terms of food, nutrients, education, and fitness [26,27]. These factors distort the gender make-up of the entire population which will have an inevitable impact on the marriage system as is being observed in certain states like Haryana and Punjab where brides must be imported from other states and are subjected to exploitation. The skewed sex ratio will also increase violence against women and promote human trafficking. In view of this an up-to-date systematic analysis for SRB from different Indian States and Union Territories using data from National Family Health Survey (NFHS) 4 (2015-2016) and NFHS 5 (2019-2021) was conducted and this paper offers a regional overview of these growing gender imbalances, as observed in different regions of the country. Although laws forbidding infanticide, abandonment and neglect of girl child already exist, stricter enforcement is now the need of the hour. Addressing deeply rooted cultural norms, biases, and systemic challenges requires ongoing efforts, collaboration among stakeholders, and a sustained commitment to creating an environment where women can thrive socially, economically, and politically. Achieving gender equality requires a multifaceted, intersectional, and persistent approach that involves all levels of society working together toward a common goal.

Methodology

The study is centered around secondary data analysis based on the NFHS data in India. The NFHS is a significant source of demographic and health information collected from a representative sample of households across the country. The survey has been conducted in multiple rounds over the years to monitor changes in various health and demographic indicators.

This study focused on analyzing SRB in India, comparing data from the NFHS 4 (2015-2016) and NFHS 5 (2019-21) rounds. The SRB is an important indicator that reflects the number of male births per 1,000 female births. Skewed SRBs often indicate gender-based discrimination, including female foeticide or other practices that lead to a preference for male children.

The study reviews the SRB for the children born in the last 5 years across different States and Union Territories. Among women age 15-49 whose last pregnancy in the 5 years preceding the survey ended in an abortion due to female foeticide was reviewed from NFHS 5 to explain the skewed SRB. The study can potentially identify trends and changes in SRB over time, enabling researchers to assess the effectiveness of policies and interventions aimed at addressing gender-based discrimination and promoting gender equality.

Results

As per NFHS-5, India’s Sex ratio is 1020 females per 1000 males where the sample size of the survey was 6.1 lakh households. However, the country’s SRB at birth was 929 which is below the national standard sex ratio of 952 female births for 1000 males. However, this SRB has improved by 10 points from 919 females, recorded in NFHS-4. The total rise may be contributed by the improvement of SRB by significant 25 points in the urban areas (from 899 in NFHS-4 to 924 in NFHS-5).

People in urban areas are better positioned to exploit the system as they have better access to health care facilities. As a result, they resort to more neonatal tests in spite of them being banned in India. This allows them to abort the girl child. 15 States/UT’s out of the 36 as per NFHS-5 were below the natural sex ratio of 952. In ten states, the SRB was found to be below 900 (DNH & DD: 817, Chandigarh: 838, Goa: 838, Himachal Pradesh: 875, Tamil Nadu: 878, Rajasthan: 891, Haryana: 893, Odisha: 894, Telangana: 894 and Jharkhand: 899) (Figure 1).

Figure 1: State wise percentage change in SRB in NFHS 5 comparing with NFHS 4.
When compared with NFHS 4 data, a decline in the ratio has been observed in thirteen states. The most notable decline was in DNH& DD (983 to 817), Chandigarh (981 to 838) and Goa (from 966 to 838). Tripura is the only state that has SRB above 1000 (i.e., more females born than males). Tripura is one of the North-Eastern states of country, where the socio-cultural norms are little different. Northeast states follow matriarchal culture and hence women experience more freedom and support from their families. This could explain the favourable SRB recorded here. Major signs of improvement in SRB was also observed in NCT of Delhi, Puducherry, Lakshadweep, Sikkim and Ladakh (More than 13%) (Figure 2).

Observing child sex ratios, in the fifteen states, the change in the ratio is below than the national average. There are seven states where the data for female foetus is more than or equal to 2.1% i.e. of the national average (Table 1). These states are: DND & DD, Goa, Bihar, Jharkhand, Chhattisgarh, Manipur, and Maharashtra.

![Figure 2: State wise percentage change in SRB in NFHS 5 comparing with NFHS 4.](image)


Sex ratio at birth may be less due to female feticide which cannot be accurately assessed, an unavoidable limitation. NFHS 5 captured the main reasons among women age 15-49 whose last pregnancy in the 5 years preceding the survey ended in an abortion, and female foetus was one of the reasons. In India, 2.1% women reported performing abortion due to female foetus and twelve states out of the 36 states reported above the national level and thirteen states reported as zero for this foetus and twelve states out of the 36 states reported above the national level and thirteen states reported as zero for this

![Figure 3: States with abortion due to female foetus is more than national average and their change in child sex ratio.](image)

Note: AP: Andhra Pradesh; BR: Bihar; CG: Chhattisgarh; DNH &DD: Dadra and Nagar Haveli & Daman and Diu; GA: Goa; JH: Jharkhand; KA: Karnataka; MN: Manipur; PB: Punjab; TG: Telangana; UP: Uttar Pradesh.

It’s concerning to note that there are six states where while CSR has decreased and the incidence of abortion due to female foetuses has increased (Figure 4). This situation suggests a complex issue related to gender discrimination and potentially skewed sex ratios. The states are: DNH & DD, Goa, Bihar, Jharkhand, Chhattisgarh, and Maharashtra.

![Figure 4: States with less child sex ratio and more abortion due to female foetus.](image)

It is important to analyse the underlying factors contributing to these trends in each of these states. Several factors might be at play, including socio-cultural preferences for male children, access to sex-selective technologies, economic factors, and the unawareness of government policies and interventions amongst people.

**Recommendations and Conclusion**

In-spite of passing the PC-PNDT Act, 1994 (amended in 2003), the practice of gender biased sex selection persists throughout the country which is evident by the tilted sex ratio observed in different States/UT’s. Several other legislations to curb gender discrimination have also been passed. These in-

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**Table 1: Percentage change in CSR in relation to abortion of female foetus.**

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>States/UTs</th>
<th>Percentage Change in Child sex ratio</th>
<th>Abortion due to Female Foetus</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DNH &amp; DD</td>
<td>-16.9</td>
<td>7.6</td>
</tr>
<tr>
<td>2</td>
<td>Goa</td>
<td>-13.3</td>
<td>7.3</td>
</tr>
<tr>
<td>3</td>
<td>Bihar</td>
<td>-2.8</td>
<td>5.3</td>
</tr>
<tr>
<td>4</td>
<td>Jharkhand</td>
<td>-2.2</td>
<td>4.9</td>
</tr>
<tr>
<td>5</td>
<td>Chhattisgarh</td>
<td>-1.7</td>
<td>3.5</td>
</tr>
<tr>
<td>6</td>
<td>Manipur</td>
<td>0.5</td>
<td>3.5</td>
</tr>
<tr>
<td>7</td>
<td>Maharashtra</td>
<td>-1.2</td>
<td>2.1</td>
</tr>
<tr>
<td>8</td>
<td>Chandigarh</td>
<td>-14.6</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>Kerala</td>
<td>-9.2</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Tamil Nadu</td>
<td>-8.0</td>
<td>1.6</td>
</tr>
<tr>
<td>11</td>
<td>Himachal Pradesh</td>
<td>-6.6</td>
<td>1</td>
</tr>
<tr>
<td>12</td>
<td>Odisha</td>
<td>-4.1</td>
<td>1.5</td>
</tr>
<tr>
<td>13</td>
<td>Meghalaya</td>
<td>-2.0</td>
<td>0</td>
</tr>
<tr>
<td>14</td>
<td>Nagaland</td>
<td>-0.8</td>
<td>0</td>
</tr>
<tr>
<td>15</td>
<td>Rajasthan</td>
<td>0.5</td>
<td>1.0</td>
</tr>
</tbody>
</table>

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It is important to analyse the underlying factors contributing to these trends in each of these states. Several factors might be at play, including socio-cultural preferences for male children, access to sex-selective technologies, economic factors, and the unawareness of government policies and interventions amongst people.
clude i) Infanticide Regulation Act, 1870, ii) The Child Marriage Restraint Act 1929, amended in 2006, and iii) The Dowry Prohibition Act 1961, amended in 1985. In addition, many schemes for girl and women welfare and empowerment were launched to enhance the value of girl child and balance the SRB and CSR. However these policies are well placed, progress in bringing out any meaningful change has been limited. The issue requires constant efforts, further strengthening of existing policies and research efforts to identify the required changes at the different societal and cultural levels toward valuing women.

Furthermore, addressing the decline in child sex ratio and the increase in abortions due to female fetuses requires a comprehensive approach involving awareness campaigns, educational programs, stricter enforcement of laws, and efforts to change societal attitudes toward gender. India has taken several policy and programmatic initiatives to promote gender parity and women’s empowerment across various sectors. These initiatives aim to address issues related to education, health, economic opportunities, legal protection, and social inclusion. The existing policies and programs collectively aim to create an environment where women can fully participate in all aspects of society and contribute to India’s development. Achieving gender parity is a vital goal for India’s progress and development. However, this aspiration comes with its own set of challenges rooted in deep-seated social norms. To realize true gender equality, it is essential to challenge these norms and implement a sustainable plan that brings about lasting change.

**Challenging Social Norms**

**Overcoming Gender Bias:** Tackling unconscious biases that perpetuate gender stereotypes is crucial. Educating individuals about these biases can lead to more equitable attitudes and behaviors.

**Empowering Girls:** Breaking the cycle of discriminatory practices requires empowering young girls with education, skills, and opportunities. When girls are empowered, they can challenge societal norms and pave the way for change.

**Engaging Men and Boys:** Men and boys play a pivotal role in shifting norms. Encouraging them to actively participate in promoting gender equality can lead to transformative change.

**Addressing Traditional Roles:** Rigid gender roles often limit women’s potential. Promoting women’s participation in traditionally male-dominated fields can challenge norms and redefine societal expectations.

**Promising Sustainable Plan**

**Education and Awareness:** Launching nationwide campaigns that educate people about gender equality can gradually shift perceptions and behaviors. Awareness initiatives can target all age groups.

**Strengthening Legal Frameworks:** Enforcing and strengthening laws against gender-based discrimination and violence is essential. A robust legal framework ensures accountability and provides a safety net for women.

**Comprehensive Skill Development:** Equipping women with skills that match the demands of the modern workforce can enhance their economic independence and decision-making power.

**Investment in Healthcare:** Ensuring accessible and quality healthcare for women addresses their unique health needs. Healthy women can contribute more effectively to society.

**Promoting Women’s Leadership:** Increasing women’s representation in decision-making roles across sectors is a powerful way to challenge norms and drive change from within.

**Community Mobilization:** Collaborative efforts involving communities, civil society, and government can create a groundswell of support for gender equality.

**Supportive Work Environments:** Implementing family-friendly policies in workplaces can help women balance their professional and personal lives, ensuring continuity in their careers.

**Youth Involvement:** Engaging young people through education and peer networks can shape future attitudes and behaviors towards gender equality.

**Data-Driven Interventions:** Regularly collecting and analyzing gender-disaggregated data can guide evidence-based policies that target areas needing the most attention.

**Partnerships and Collaboration:** Aligning efforts among governments, NGOs, corporations, and international organizations amplifies impact and resources.

India must implement the PC-PNDT Act more stringently and dedicate more resources to fight preference for the male child. Ultrasound machines to be included in the Drugs and Cosmetics Act to regulate their import are an initiative recently taken up by the Government of India. The policies which provide benefits for female child should be reinforced and revamped. Abolishment of the dowry system and giving equal share in land and commodities for female child should be firmly pressed upon. Policies should be reframed to give women equal opportunities in politics, management and organizations and occupations should be given. The problem web of females which make them act against other females should be identified and corrected. Educational measures include changing the attitude of both men and women for not viewing women as commodity should be brought upon. The idea of importance and need for each gender in each field should be emphasized. The culture of respect should be taught against both genders in schools and higher educational institutes. Advocacy measures including audits to track the prenatal abortions, tracking of female education, nutrition and health-care access, involvement of media, and other NGOs to enlighten the dark areas and rectify the odds should be enforced. Aiding in setting up own enterprises for the women can also help in the improvement of the current situation. Promoting cultural good practices for females including the retrieval of matrilineal system, the conversion of virginity decisions to own choice, and role reversal in chores are some of the common practices that can help to raise the CSR.

As India working tremendously to achieve gender parity, it’s essential to acknowledge that this journey is not instantaneous, but requires collective, persistence, and a multi-faceted approach that addresses the underlying norms, structures, and systems that perpetuate gender inequality. Infusing the community level innovative approaches, also addressing the human behaviour may ensure the path towards a more equitable and inclusive world.

**Limitation:** The accurate figures for vital statistic registration which mostly can be attributed to unwanted births, abandoned infants and home-based deliveries.
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