# Socio-Cultural Attitudes for Son Preference: A Study of the Urban Mali Women in Pune, Maharashtra

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#### **Abstract**

Women and girls in India have more than matched with men and boys and have contributed significantly to economic growth and social upliftment of the country. The just-released data from the Indian 2011 census has refocused the world's attention on the dark side of India's demographic change a low and falling ratio of girls to boys. For the last 40 years, each successive census has found the number of young girls shrinking relative to boys. Even though women and girls are stepping out of the traditional occupation of agriculture and are marching ahead in the service sector, manufacturing and I.T. industry, they continue to maintain their hold on traditional arts and crafts. Amusingly, the deterioration in the child sex ratio has occurred in spite of rising living standards and improvements in every other indicator of human development such as average life expectancy, infant mortality, male and female literacy, fertility rate, and schooling enrollment of children.

Keywords: Economic growth; Social upliftment; Demographic change; Infant mortality; Literacy

#### Introduction

India is one of a handful of countries that has significantly more males than females. The problem is particularly severe at younger ages; the child sex ratio (i.e., the number of girls per 1,000 boys in the 0-6 year's age group) has declined steadily-from 964 in 1971 to 962 in 1981, 953 in 1991, 927 in 2001, and 914 in 2001. Although a distorted child sex ratio is observed in other Asian countries, including China, Taiwan, Singapore and Vietnam, India has one of the lowest child sex ratios in the world. Sen (2003) puts the number of 'missing females' (i.e., unborn girls) in India as high as 37 million.[1]

Almond and Edlund (2008), Almond (2009)

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## Index of Son Preference for Major States in India, 1990

States	Index of Son Preference*	Rank
Andhra Pradesh	13.8	11
Bihar	24.5	4
Gujarat	23	6
Haryana	14.3	10
Karna taka	20	8
Kerela	11.7	12
Madhya Pradesh	27.1	2
Maharashtra	18	9
Orissa	23.4	5
Punjab	20.3	7
Rajasthan	25	3
Tamilnadu	9.2	13
Uttar Pradesh	21.6	1
West Bengal	14.3	10
All India	20	

Index of Son preference =100 (E/C)

Where, E = the excess number of sons over daughters considered ideal, C= the ideal family size.

**Sources:** Rajan S.I., U.S. Mishra and T.K. Vimla (1996) "Choosing a Permanent Contraceptives: Does Son Preference Matter?" Economic and Political Weekly, July p.20, p.1980. The Third All India Survey of Family Planning Practices in India, ORG, Vadodara,1990. Calculated by Eapen and Kodoth (2001).

Das Gupta (2005) and Bhat (2006) observed that the low child sex ratio in India arises from the practices of sex-selective abortions and excess female infant mortality, both of which are the result of a strong cultural preference for sons over daughters.[2-4]

The low and falling child sex ratio in the country is a matter of grave policy concern, not only because it violates the human rights, in the long run this will have serious sociocultural and economic implications such as increased violence against women, rape, trafficking. Angrist (2002) points there may be longer-run adverse impacts from a marriage market squeeze caused by an excess supply of male relative to female youth. Already, states like Haryana and Punjab, where the sex ratio has been extremely distorted for several decades, have been experiencing bride trafficking.[5]

As abortion was legalized in India in 1971, technologies to diagnose the sex of the fetus became widely available. As the prices for sex-selection diagnostic tests fell during the 1980s and 1990s, the practice became even more rampant. The Indian government responded to this problem by passing the Pre-Conception and Pre-Natal Diagnostics Techniques (PNDT) (Prohibition of Sex Selection) Act in 1994 prohibiting the use of diagnostic methods to diagnose the sex of an unborn child.

Despite a ban on sex-selective abortions, due to the unethical practices practiced by the concerned medical fraternity, the clients and all other stakeholders who encourage these sex-selective abortions, the child sex ratio declined from 945 in 1991 to 927 in 2001 to 914 in 2011.

Attitudes and beliefs are the principal conditioning factors for human action. Attitude refers to individual's feelings, thoughts and inclination to act towards some part of his surroundings. Theodarson and Theodarson (1969:19) "An attitude is an orientation towards certain objects including persons other than one self or situations".

According to the Oxford Dictionary ethics means moral principles that govern a person's

behavior or the conducting of an activity. According to Collin's Dictionary ethics means a social, religious, or civil code of behavior considered correct, especially that of a particular group, profession, or individual. Ethical Behavior is acting in ways consistent with one's personal values and the commonly held values of the organization and society. People recognize some common ethical norms but different individuals interpret, apply, and balance these norms in different ways in light of their own values and life experiences.

In a patriarchal society like India the desire for a male child is so much that women resort to unethical practices like abortion, amniocentesis and female infanticides. This strong preference for a male child is deeply embedded in the socio-cultural attitudes of many women. R.P.Mohanty and D.N.Biswal (2007) point that 88 percent of the caste Hindu parents in their sample desired to have male issue as their first progeny and the important reason for their preference was the economic factor followed by continuance of lineage, support in old age and to perform funeral rites for 'mukti' and salvation of the soul.

which Maharashtra boasts of comparatively higher level of education is no exception when it comes to the dip in child sex ratio. The current sex ratio for Maharashtra is 922 women for every 1000 men, the sex ratio is higher in rural areas as compared to urban areas and the sex ratio in the age group of 0-6 years is 913 girls for 1000 boys. A report in Times of India (8-2-2008) on analysis of Child Sex Ratio (CSR) based on 2001 census data conducted by the population research centre of Pune's Gokhale Institute of Politics and Economics reveals that barring Akola, the remaining 34 districts of Maharashtra have shown a decline in CSR. Shockingly the richer districts such as Kolhapur, Satara, Sangli have the lowest sex ratio. Pune district has the tenth worst sex ratio of 902 girls for 1000 boys.

Historical Background of Mali Community

Mali's are widely distributed in Maharashtra and constitute the third largest

cultivator caste of peasant castes. The Mali's belong to the Other Backward Classes (OBCs). The category of other Backward Castes comprises the non-untouchable lower and intermediate castes who were traditionally engaged in agriculture, animal husbandry, handicrafts and functional services.

Mali's are not included among regular cultivators but are a lower group permitted to take up small waste plots adjoining the inhabited area and fertilized by its drainage. They still hold a lower rank than the ordinary cultivator. The word Mali is derived from the Sanskrit word mala meaning garland. They are an occupational group engaged in gardening and supplying flowers to Hindu temples. K.L. Sharma (1997), points that the OBCs continue to be peasant castes and in education, professions and white-collar jobs they lag behind the upper castes.

To bring a change in society a change has to occur in the attitudinal level of the individuals of the society leading to behavioral changes and progressive action. This in turn may lead to further structural change and development. K.L.Sharma (2007) maintains that urbanization leads to breakdown of traditional beliefs and influences people in changing their attitudes, beliefs and world view. He further points that patriarchy is very strong in India, which is still under the influence of feudalistic lifestyles and values despite several efforts.

### Women in Mali Community

Though women in India are backward, the women belonging to Other Backward Castes (OBCs) are still backward. The OBCs women are being exposed to the same kind of forces of change to which women of other advanced communities are exposed, but in view of the general backwardness of the OBCs group one may not expect the same kind of enlightened family and community atmosphere. K.L.Sharma (2007), reports that the OBCs have remained weak and backward socially and educationally. The OBCs women have to face different kinds of social problems such as the attitude of the parents, husbands and in-laws,

which by and large are traditional, orthodox and conventional.

This kind of background makes it difficult for women to progress. But it is increasingly felt that the development of the nation is integrally linked with the empowerment of women. We have transformed as a country to attain political freedom and have come a long way since then. We have the potential to lead the world in the decades to come. To manifest that potential into performance, we need fundamental transformation and not just in the constitution, judiciary, political system, education, infrastructure, economy and transport. What we need is change of attitudes and mindsets. It is in this context the study becomes significant to have an integrated socio-economic and political development of the country.

Role of Mahatma Jyotirao Phule and Savitribai Phule

Mahatma Jyotirao Phule and Savitribai Phule belonged to Mali family which was considered lowly during that period i.e. eighteenth century. He was a symbol of revolt against all oppressive features of Indian society. Mahatma Phule ideal was to raise the educational standard of the depressed classes' i.e the 'Shudras' and the 'Atishudras' including women who were deprived of all their rights as human beings under the caste system, so that they became aware of their own condition and aspire to rise. The first school for girls was started by him in 1848 in India and that too in Poona, which was a Brahminical fortress during those days. This was the first school in the whole of India for women started by an Indian. Mahatma Phule and his wife 'Krantijyoti' Savitribai Phule were the pioneers of women's education in India and were real emancipators of women. According to them it was a sin to discriminate human beings on the basis of sex. They envisaged a society based on liberty, equality and fraternity.

In post independent India education has had a deep impact on women attitudes and values leading to their mobility in all aspects. Hence the present study focuses on sociocultural attitudes towards son preference among the urban Mali women belonging to Other Backward Castes (OBCs) in Pune.

## The Setting

Pune was selected as a research area due to its cultural, educational, military, religious and industrial features The selection was purposive as Mahatma Phule and Savitribai Phule were from Pune belonging to Mali community, they started the first girl's school and their activities for upliftment of women in Pune and also because Mali's are predominant in large numbers in different areas of Pune such as Hadapsar, Wanavdi, Pune Station area, Bhavani Peth and Kasba Peth.

## The Sampling

Accordingly, 382 women of the households were selected from Hadapsar, Wanavdi, Kasba Peth, Bhavani Peth and Pune station areas using the technique proportionate random sampling.

#### Methods of Data Collection

A combination of qualitative and quantitative methods of data collection was used. This combination was purposive as this gives a holistic insight to the research problem and adds to the anthropological understanding of the community. These techniques give an in depth account of the attitudes, opinions, behavior of a community/group or individual, which is being studied.

#### Tools of Data Collection

Quantitative and qualitative data was collected through pre-tested semi-structured interview schedule. Also qualitative information was supplemented by participant and non-participant observation. To get the beliefs and attitudes of the respondents in detail, interview schedule were employed ingroup as well as personal interviews, were the discussions were more informal in nature

mainly aimed at collecting maximum qualitative information.

The qualitative data were collected through interview schedules through group and personal interviews. The selection of these respondents was done through friends, elderly and experienced persons. The interviews were of open-ended type.

The Sample Profile

Age

Out of the total sample, 12.8% of the respondents belong to below 25 years age group; 40.1% belong to 25-34 years age group; 21.3% belong to 35-44 years age group; 15.2% belong to 45-54 years age group; and 10.6% belong to the age group of 55 years and above. It indicates that we have maximum data and views and attitudes of young and middle aged women and some data from older women.

#### Marital Status

Majority of the respondents 83.6% were married. Few 9.4% of the respondents were unmarried. Few 6.5% of the respondents were widows and negligible .5% of the respondents were divorcees.

## Age at Marriage

Majority 60% of the respondents were married in the 18-24 years age group; few 5% of the respondents were married in the 25-29 years age group; some 25.6% of the respondents were married below 18 years of age. The data indicates that maximum numbers of respondents were married between 18-25 years.

When the actual age at marriage is seen the data shows that a large number of 52 (15%) respondents were married at the age of 19 years of age, followed by number 42 (12.1%) of respondents married at 21 years of age.

## Age of Husband at Marriage

Majority 61.4% of the respondents were

married in the 25-34 years age group; some 29.2% of the respondents were married in the 18-24 years age. The data indicates that maximum numbers of respondents were married between 25-34 years whereas for women the ideal age is thought to be 18-25 years for getting married as can be seen from the previous data on age at marriage for women.

## Length of Residence in Pune

In all 47.1% of the respondents are born and brought up in Pune city, whereas 34.5% of the respondents have been living in the city for twenty to thirty years. Few 5.1% of the respondents have been living in Pune for less than five years, while 3.3% have been living for 6-10 years, 4.5% for 11-15 years and 5.5% for 16-20 years.

## Type of House

Nearly half 49.2 % of the respondents live in flats/blocks. About 7.9% of the respondents possess bungalows and about 42.9% live in "chawls".

### Ownership of House

Almost 89.2% of the respondents own houses and some 10.8% of the respondents live in rented houses.

#### Family Type

In the present study majority 68.6% of the respondents are living in joint families and some 30.7% of the respondents are living in nuclear families. The data reveals that higher percentages of the respondents are living in joint families. This question was not asked to 3 (.7%) respondents who remained unmarried by choice.

### Vehicle Ownership

About 56% of the respondents possess twowheelers like scooter or motorcycles; whereas few possess 1.6% four wheelers, few have 1.6% bicycles. And some 28.5% of the respondents have two wheelers as well as four wheelers; few 3.4% of them have rickshaw, whereas 8.9% respondents did not possess any vehicle.

#### Educational Status

Few 1.3% of the respondents are illiterate, while 6.8% are educated up to primary school level, 16.7% up to secondary school level, 18.7% up to matriculation or SSC, 14.1% possess twelfth standard/diploma, or certificate education, 5.8% are undergraduates, 25.9% are graduates while 7.6% are post-graduates and 3.1% have professional degrees such as doctors, engineer's, and lawyers. Thus the sample consists of maximum number of graduates and it is also seen that along with educated respondents there are few illiterates also.

#### Occupational Status

Most (52.6%) of the respondents are housewives, few (4.2%) are unemployed and few (1.3%) are students. Some (26.2%) are self employed out of which (18.1%) were engaged in taking tuitions, running a beauty parlor, tailoring etc. and doing household business like selling saris, dress materials, "masalas", pickles, 'papads' cosmetics and so on, whereas (8.1%) of the respondents helped their husband's or family in their business such as Xerox shop, electrical goods shop, general stores, STD and PCO booth, looking after the dairy business. Some (6.9%) of the respondents were engaged in teaching and (6%) of the respondents were holding clerical jobs. Few (1.3%) of the respondents were doctors; while few (1%) were nurses and (0.5%) were 'corporators'. The data shows that majority are housewives, some were self employed, next in order were the respondents helping in the family business, next in rank were the one's holding teaching and clerical jobs.

## Monthly Income of the Respondents

Some 18.1% of the respondents monthly income is below Rs. 5000, 13.8% of the

respondents have monthly income ranging from 5000-10,000. About 2.5% of the respondents have a monthly income from 10.000-15,000, while 0.7% of the respondents have a monthly income from 15,000-20,000 and there are majority 64.9% of the respondents who had no income belonging to housewives, those helping in the family businesses and students category. Thus we have respondents from the lower strata to the higher strata in terms of monthly income.

## Net Income of the Family from All Sources

There are 8.9% of the families of the respondents whose monthly income is below Rs.5000, some 21.8% of the families have Rs.5000-10,000 monthly income, 21.6% of the families fall in the Rs.15, 000-20,000 income bracket, 23.6% of the families belonged to the Rs.20, 000-25,000 income group, 10.7% families had a monthly income between Rs.25, 000-30,000 and 11.4% of the families have a monthly income of Rs.30, 000 and above. And the researcher also came across eight (2%) very wealthy families residing in Koregoan Park and Dhole Patil Road whose monthly income goes into crores. Therefore, study has respondents from the lower strata to the higher strata in terms of monthly income.

## Mali Women's Socio-Cultural Attitudes towards Son-Preference

An attempt has been made in the present study to explore the urban Mali women's sociocultural attitudes towards son preference in Pune. The enquiry regarding the attitudes for son preference was put only to the married respondents.

Keeping this fact in view the following four indicators were selected for the study

## 1) Attitude Regarding Sex of the Child during the First Pregnancy

In a family when a newly married bride conceives for the first time the whole family is excited and waits eagerly for the birth of the child. Due to our tradition, which gives more importance to the male child, aspiration for male babies is more. This trend has been in existence since Vedic period. Even today in the present time this attitude is universal in Indian society. Ross (1961) observed that a woman's position as a "mother of sons" gives her more authority in the house.

To know the expectation of the respondents regarding the birth of the first child they were asked. "What did you expect (girl/boy) when you were expecting for the first time? To this more than half (52.3%) of the respondents said that they expected a son for the first time as they felt that once they had a son then there would be no tension regarding the sex of the child in the second pregnancy. They justified their point by saying that a son was an economic asset, a support in the old age and that a family is incomplete without a son. Rest (46.6%) of the respondents except for very few had no expectation for a son during their first pregnancy but they were under a lot of stress during the second pregnancy and expected for a son as they had a girl child as their first issue.

Hence the analysis indicates that almost all the respondents desired for a son if not during the first pregnancy then it was during the second pregnancy for a number of reasons as seen in the data which means the respondents still hold on to traditional attitudes. A promising finding is that very few of the respondents held the view that a girl or a boy is equal. So it can be concluded that son preference is very strong among the Mali community.

## 2) Son Preference Depending on the Number of Female Children the Respondent has:

The desire for the male child is more prevalent if the family already has one or more female children. Many families do not follow any family planning till one male child is born. Tests are commonly done in the second or in the third pregnancy when the couple has first one/two daughters. According to Times of India, (24-9-2008) a study carried out at

Kasurdi, a village 40km from Pune by Colonel R Bhalwar, head of the preventive and social medicine, Department of Armed Forces Medical College and others reports that sex tests are sought by parents if the first child is a girl, 62.7% of the respondents felt that a male child is necessary. The study also revealed that the sex of the first child, concern about the sex of the child during the second pregnancy, number of children and type of family were significant factors contributing to the preference of a son.

In the present study, nearly half (43.2%) of the respondents said that they didn't have any expectation for the first time, but when all these respondents had a girl child first time all of them wanted a son the second time. Whereas more than half (39.3%) of the respondents said that they had a male child first time and they had no tension or need to worry. They said that after all it is the son who looks after the parents in old age, performs the funeral rights.

Four of the respondents from Hadapsar wanted a son as one of them had 3 daughters and the other had two daughters and so they had undergone sex determination test. Two respondents had 2 daughters by Caesarian and the doctor told them not to take a third chance as it was risky to undergo third caesarian. One of them said, "I had decided even if I lose my life I will take a third chance for a son and I got a son. She also said "Shevti Mahatarpani Mulacha Aadhar Aasthe". (After all it is the son who supports in old age)

Thus the above data shows that nearly half had girl child first time and so they wanted a boy during the second pregnancy while the others had no reason to worry as they had a male child in the first pregnancy. The desire for a son made the respondents go for sex determination tests and also made them take the risk of undergoing three caesarians putting their lives at risk as they felt that a son takes care in the old age.

3) Pressure of 'Husbands and In-Laws' for Son Preference

Times of India dated 3rd September 2011 in

"Violence towards women cause for female foeticide." reports, in a recent study conducted in Haryana by the Centre for Social Research, it has been understood that fear of violence towards women is a cause for female foeticide. The study also reveals that a woman who has only daughters is a victim of domestic violence because of her incapacity to have male children. "Mothers-in-law and husbands pressurize us to have sons, and we cannot even turn to our own family members because they are also under pressure," was said by the respondents in a group discussion.

The report "Reflections on the Campaign against Sex Selection and Exploring Ways Forward" prepared and printed by Centre for Youth Development and Activities, published in February 2007 found that among the families (husbands and in-laws) in general there doesn't seem to be any hesitation to avail of abortion services in order to have a male child. Some of the women in the field study complained about the pressure from their families. It seemed to imply that their mothersin-law and husbands were so influenced by the son-preference mentality that they did not have difficulty in pushing the women into sex selective elimination of girls. Susheela Kaushik (1993), reports that the mother's reaction to the birth of a girl or a boy is greatly controlled and influenced by the reaction of the relatives particularly her in-laws and husband. The willingness of the women to go for such tests could be rooted in the woman's cultural conditioning within a patriarchal environment with a strong son-preference.

In the present study when asked why they wanted to have a son some (34.2%) of the respondents said that it was due to the in-laws and husband's pressure that they expected a male child during the first pregnancy and said that if they give birth to a son for the first time then they wouldn't have any tension during the second pregnancy.

Five of the respondent's in a group interview said "Mulga nahi jhala tar sasuche tombne aikkava lagte, navra suddha gharchaincha aikto, ani doosra lagna suddha karayla tayar hoto, baicha kahi chalet nahi" (If one doesn't give birth to a

son we have to listen to the taunts of the m-inlaws, even the husbands listen to their family members and even gets ready to go for a second marriage, there is nobody to listen to the women of the house). This shows how the women are under tremendous pressure for a son from her in-laws and husband.

The study also had three elderly respondents whose husbands had gone for second marriage just to beget a son. This may be due to the reason that earlier there was no availability of such sex determination tests. From the younger lot there were 11 respondents who went for sex determination tests and five of them took Ayurvedic medicines to beget a son.

Thus the above data shows that some of the respondents were under strong pressure from the husband and in-laws for a son. Also three of the elderly respondent's husbands went for second marriage as their wives could not give birth to a son, few of the young respondents went for sex determination tests and few took ayurvedic medicines to get a son. On the whole the data indicates that women have no important role and have an unequal status in the family and are under heavy stress to give birth to a male child.

### 4) Reason Why a Girl is not Wanted

The Asian Age, Mumbai dated 25-4-2003 reports, according to the Chandigarh (Punjab) based Institute for Development and Communication, during 2002-2003 every ninth household in the state acknowledged sex selective abortion with the help of ante-natal sex determination tests.[6]

Voluntary Health Association of India (2003) "Darkness at Noon-Female Foeticide in India", Delhi published its research report based on fieldwork in Kurukshetra in Haryana, Fatehgarh Sahib in Punjab and Kangra in Himachal Pradesh that have worst child sex ratio as per 2001 Census. The study surveyed 1401 households in villages, interviewed 999 married women, 72 doctors and 64 Panchayat members. It revealed that

"The immediate cause for the practice of female foeticide is that daughters are perceived as economic and social burden to the family due to several factors such as dowry, the danger to her chastity and worry about getting her married." [7]

In the present study nearly all (98.9%) the respondents felt that the daughter marries and goes to another family, has to be married with a huge dowry, even if educated and earning she cannot take care of the parents as it is against the tradition, even if she feels like looking after the parents/take care of the parents business she cannot go against her inlaws and husband. Also they said that a daughter cannot perform the last rites due to our tradition. Only few (1.1%) held the opinion that girls are more loving, caring and emotional about their parents. They said that nowadays daughters seemed to more useful to their old parents than the sons. They felt that a girl child is Goddess 'Lakshmi' and she brings good luck to the family.

Hence the data reveals that the Mali women respondents still hold the traditional belief were in the girl child is undervalued and is looked upon as an outsider. Overall it is seen that the daughter is looked as an economic liability with no returns.

## 5) Urbanization, Education, Occupation and Income Levels

Urbanization leads to breakdown of traditional beliefs and has influenced women in changing their attitudes towards education, occupation, marriage, family, politics and religion. According to K.L.Sharma (2007) Urbanism refers to the process of change in attitudes, beliefs and styles of life.

The report "Reflections on the Campaign Against Sex Selection and Exploring Ways Forward" prepared and printed by Centre for Youth Development and Activities, published in February 2007 is an outcome of an assessment commissioned by UNFPA, New Delhi on the alarming state of the declining child sex ratio in India, advocacy efforts made

to address it and future strategies for the campaign as a whole.[8]

The report states that the growth of affluence, urbanization, type of occupation and income levels within the context of globalization is perhaps leading to a situation where the girl child is undervalued significantly because she is not a good "investment". In this context, some of those interviewed were of the opinion that this undervaluing of the girl child was more of an urban phenomenon and could be attributed to the general erosion of 'values' and a growing commercial attitude. Interactions with several women in and around Gurgaon district in Haryana indicated that an overwhelming majority of the women were aware of the methods of sex-selection. Furthermore, since the people had become very rich in this part of the country there was a fear that the property would go to the son-in- law, when the girl gets married. According to Susheela Kaushik (1993) irrespective of the education and income levels, families aspire for a male child.

The samples of the present study had all respondents from the urban areas of Pune, those who have been staying in Pune since last 20 to 30 years. The sample has maximum number of young, middle aged graduate respondents married in between 18-25 yrs of age and staying in joint families, occupation wise majority were housewives. The sample had respondents from Bund garden, Dhole Patil Road, Koregoan Park belonged to highly affluent families some of whom were big builders, land owners, huge electronic shop owners, and Petrol pump owners residing in huge palatial bungalows.

The researcher came across 9 respondents (one a engineer housewife, two of them graduates-one running a high end parlour cum boutique, other sitting at the cash counter of their family owned big electronics shop, another two graduate housewives belonging to highly rich political families, one a primary teacher, two H.Sc passed housewives and one postgraduate housewife whose family had two petrol pumps) who had gone for sex

determination tests from the above mentioned areas. All said that they had been to Mumbai for this test. The reasons given by these respondents were:

- Before there were no such tests to determine the sex of the child, now if one can afford these tests then why not go for these tests.
- They felt that one should have a son for a status in society and also to look after the family business.
- They said that a girl marries and goes away then who will look after the family businesses, which have been set up by hard work of generations.
- Three of the respondents, two of them graduate housewives and one a graduate running a high end parlour cum boutique said "Even if it is said that girls and boys are equal but can a girl after marriage look after her father's business, even if she wants to, it all depends on her husband and in-laws wish. Moreover she will not be allowed to take care of the business and the property and business will go to the son-in-laws. Hence every family should have at least one son to take care of the family business.

While the respondents from Hadapsar, Kasba Peth and Bhavani Peth belonged to middle class and lower middle class families some of whom were petty shop owners, some belonged to families who were teachers, tailors, clerks etc. living in chawls and flats. The researcher came across 7 respondents (one a graduate secondary teacher, two primary educated- one a tailor, another running a mess from home, an illiterate vegetable vendor, an S.S.C passed housewife, a nurse having done a certificate nursing course after S.S.C, an H.Sc passed part time insurance agent) who had gone for sex determination tests from the above mentioned areas. Out of these, 2 of them went for sex determination test; the other 5 felt that the test is costly and risky so took Ayurvedic medicines. The reasons given by these respondents were:

They said that a son is necessary to

perform the funeral rites and to take care in old age.

- Five of the respondents felt that Ayurvedic medicines are safe and the success rate was 99%. They said a son is necessary to perform the funeral rites to attain salvation.
- Two of the respondents, one a graduate secondary teacher and the other an illiterate vegetable vendor and primary educated self employed said" Vanshal Mulga nahi dila tar baila kimmat naste.

  Navra doosra lagna karacha vichar karto," (If a woman fails to give a son to the family then she has no status in the family and the husband thinks of going for second marriage to beget a son)
- Another middle class graduate respondent pregnant with her third child, underwent diagnosis for the purpose of sex selection. She already had two daughters and had planned to abort if the foetus was another female. The family was reasonably well off and could afford another girl. They loved their daughters but here the motivating factor was the social attitude. The respondent said "Mulga nasla tar samajat maan naste, Don muli manun sagitlya var, are koob vayit vatte mulga nahi ka asa manthat, asa eklya var malahi vayit vatte. Asa test ahae tar ka nahi karava? (Our society makes you feel so bad if you don't have a son...' People ask, 'How many children? 'I say, 'Two girls', and they say, 'Oh, too bad, no boy. 'And I also feel very bad." She added, "When this test is here why shouldn't we have what we want?

The above data shows that the respondents from upmarket areas though born and bought up in the city, educated, working, self employed belonging to affluent families went for sex determination tests and held the view that having a son is needed to take care of the family business and for status in the society.

While the respondents from the middle and lower middle class families, educated, working,

illiterate, self employed, even after residing in urban areas since long wanted to have a son so went for sex determination tests and those who could not afford took Ayurvedic treatments which shows the strong underlying attitude for a male child to perform the funeral rites and to take care in old age.

In conclusion it can be said that irrespective of urbanization, education, occupation, income levels son preference is very strong among the urban Mali women.

#### Conclusion

The attitude regarding sex of the child during the first pregnancy indicates that almost all the respondents desired for a son if not during the first pregnancy then it was during the second pregnancy. The desire for son preference also depended on the number of female children the respondent has the data here shows that nearly half had girl child first time and so they wanted a boy during the second pregnancy while the others said they had no reason to worry as they had a male child in the first pregnancy. Also some of the respondents were under strong pressure from the husband and in-laws for a son.

Factors such as urbanization, education, occupation, and income do not seem to have any effect on the attitude towards son preference. Hence it is seen that the respondents from well to do upmarket areas felt the need for a son to have a status in society and to look after the family business. Whereas the respondents from middle and lower middle class families wished to have a male child for support in their old age and to perform the funeral rites. Some respondents resorted to sex determination tests and some took ayurvedic medicines to have a son. Three of the elderly women respondent's husbands even went for a second marriage to beget a son. The wish to have a son made some of the respondents even to risk their lives by undergoing number of caesarian operations inspite of warnings by the doctor. Thus it can be inferred that son

preference is seen among almost all the respondents irrespective of their level of education, occupation and income.

Reasons such as to take care of the family business, to carry the family name, for material and spiritual advancement, to support parents in old age, to perform the last rites of parents, to have a status in society, due to fear of inlaws and husband were reported by the respondents for their desire to have a son. They feel that girl child is a liability; a lot has to be spent on her marriage with a huge dowry, and parents cannot depend economically on their daughters as per the society rules and religious norms and after marriage she goes to another house and she cannot take care of the family business. They also feel that the property will go to the son-in-laws if there is no son in the family. Though economic factor is one of the main reasons for not wanting a female child but the underlying cultural tradition of preference for a son also remains a strong factor.

Very few of the respondents expected a girl child first time and were not worried to have a son. They said that nowadays girl or a boy it doesn't make any difference. They felt a girl is more loving, caring and nowadays they said that girls look after parents in old age, are better than boys in all aspects, moreover they felt that a daughter is a 'Lakhsmi' according to our religion. Though few, these certainly show the positive attitudinal changes among these respondents.

Thus from the above data it becomes pertinent that overwhelmingly almost all the respondents still hold on to traditional attitudes and prefer male children over the female one's which shows that the practice of inequality of sexes exists even now. Overall it is seen that the daughter is looked as an economic liability with no returns, is highly undervalued and looked upon as an outsider while a son is seen as an economic asset among the urban Mali community.

Ruth Macklin, (2012), Due to severe imbalance in the sex ratio as is already occurring in India and China, men would feel that they are at a substantial disadvantage since

many of them would be deprived of a partner. This, in turn, could result in a growth in prostitution and pressures towards polyandry and adds to the prospect of an increase in crimes like rape, incest and kidnapping. Also "the reproductive burden on women will increase because the same burden of bringing forth progeny will then have to be shared by fewer women".[9]

Despite legal sanctions, there is increasing use of sex determination technology, especially in India. Hence social reforms along with prohibition of sex determination are more likely to achieve desirable effects. Efforts should be made in all societies to increase respect for women and to enhance their status. In the end, not only legal prohibition, but the challenge is to nurture ethical values, to change the mindset of doctors and clients, to sensitize the entire society, to create a socio-cultural milieu that is conducive for girl child's survival. Multiple approaches need to be undertaken to foster a positive socio-cultural environment: such as promoting bilateral kinship models, including that daughters can continue the family line; that daughters also can worship ancestors; and, that sons and daughters inherit equally. Only through social and cultural change we will be able to halt the process of declining sex ratio.

#### References

- 1. Sen, Amartya. Missing women revisited. *BMJ*. 2003; 327(7427): 1297-1298.
- 2. Almond, D and L Edlund. Son-biased sex ratios in the 2000 United States Census. *PNAS*. 2008; 105(15): 5681-5682.
- 3. Gupta, M Das. Explaining Asia's `Missing Women': A New Look at the Data. *Population and Development Review*. 2005; 31(3): 529-535.
- 4. Bhat, PN. Sex Ratio in India. Correspondence. *The Lancet*. 2006; 367(9524).
- Angrist, Josh. How Do Sex Ratios Affect Marriage and Labor Markets? Evidence from America's Second Generation. *The Quarterly Journal of Economics*. 2002; 117(3): 997-1038.

- 22
- 6. The Asian Age, Mumbai, 25-4-2003. Times of India dated 3rd September 2011
- 7. Voluntary Health Association of India. Darkness at Noon-Female Foeticide in India. Delhi: 2003.
- 8. Centre for Youth Development and Activities.
- Reflections On The Campaign Against Sex Selection And Exploring Ways Forward. Pune, Maharashtra, India: 2007.
- 9. Ruth Macklin. The ethics of sex selection. *Indian Journal of Medical Ethics*. 2012; IX(3).

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