

The Changing Status of Women In the Indian Society



**Dr. Akhilesh Shukla
Shikha Tiwari**

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PREFACE

The basic and most important unit of the society has been the family from the beginning. For the empowerment and development of the country, first of all it is necessary to pay attention to the moral, social, economic and cultural dimensions of basic institutions like family. Balanced development of the family is very important for the development of the society. Therefore, if we want to have a complete and balanced development of the country, then we need to lay maximum emphasis on the basic institution called family. It is necessary that we should not make any discrimination between son and daughter in the family and we must explain this to our sons and get them involved in their activities. Even today, those who belong to the old belief believe that a woman cannot get any freedom, she cannot go anywhere alone, she cannot roam anywhere alone, but today's youth refuse to accept these values.

Some people also say that the importance of the walls in the house, the same importance is given to the education of the boys in the society. But how is a house made? Who are in the base of the house? The base of the house is our daughters, our girls, that means they are related to the roots. If our root becomes weak in the society, then our house or house cannot be strong at all. There is a need to understand this social context in reality.

The extent of favoritism is reached when we see discrimination in small tasks. Some people think that a girl is someone else's wealth, what job she should do. That's why some parents discriminate between boys and girls and this discrimination is visible somewhere in our behavior, in feeding and dressing. This is sheer injustice. God has given the same brain to boys and girls and today girls are proving it by bringing better results.

Girls stay at their parents' house for only a few days, so it is our duty to pay deep attention to their education, upbringing, only then we can fulfill the concept of a strong society. God has made us the trustee of our children so it is our duty to treat all members equally with full justice because both boys and girls have same power, same soul. So we should give them equal opportunities for development.

The basic objective of women empowerment is the development of women and communication of self-confidence in them. Women empowerment is important for the overall development of the society. Empowerment of women is the most important social phenomenon because they are the creators. If you empower them, make them strong, encourage them, it is better for the society. Women and men are the basis of creation and human society. Both complement each other. These are the wheels of the chariot of life by which the journey of life runs smoothly. The role of both has been equally important for stability in family and

society. The basis of change and development in a society depends on the mutual interaction of men and women, walking step by step and equal mobility of both. A chaotic situation is created in social life when any one side lags behind. The history of mankind is witness to this that where women have been neglected, the development of the society has been stunted. The role of women in creation of creation, education of children, upbringing of family is much more important than that of men, thus her position becomes central in the society. Therefore, without the progress of women, there can be no upliftment of mankind and society. As far as India is concerned "Yatra Naryastu Pujayante Ramante Tatra Devta" means where women are worshipped. The deities reside there. With this ideal any Indian woman can feel pride in comparison to the western woman. The ideal of learning in Saraswati, the ideal of wealth in Lakshmi, the ideal of valor in Durga, the ideal of purity in Ganga, even the ideal of creation in the form of Jagad Janani we find only in India.

Shikha Tiwari

Professor Akhilesh Shukla

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Psycho-Socio Analysis of The Changing Status of Women in Indian Society

• Dr. Mihir Pratap

•• Dr. Veena

Introduction- In the medieval India, the status as well as educational loss of women was very much low. The scriptures prescribed rules for child marriage at an early age not only in rural India, but also in urban India as well as well off families. The status and women's development India is heavily dependent on many different variables that include geographical location (urban rural), educational Status (caste and class), and age. Policies on women's development exist of the national state, and local levels in Status many sections, including health, education, economic opportunities, gender-based violence, and Political Participation. However, there are significant gap between Policy advancements and actual Practice of the community level.

Gandhiji's non-cooperation movement encouraged women to come forward and take part in the life of the nation. Gandhi realized the immense hidden Power of women and decided to than it towards rehabilitation of the villages. So, he addressed his appeal directly to women. Gandhiji, believed in the equality of women and wanted them to shoulder the active leadership of the movement. Gandhiji knew that it would mean much Physical suffering for them. When the movement started, women were everywhere at the forefront, e.g. picketing liquor shops, enforcing boycott of foreign physical comforts, broke restrictions taboos to join the movement.

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Equal Participation of women in the struggle became the motto of Satyagraha. This spirit of active interest in Public life grew as the movement continued longer. Women made many sacrifices and underwent sufferings generation after generation. The share of women in the battle of freedom gave them the position of equality. The appointment of women to the highest Post in India was a matter of Surprise to the outside world the distinction achieved by a few women of genius did not change the position of women. The revolutionary change lies in women's free and equal participation in all spheres of national activity and of every level From work in village to the government.

Legislative reforms have established the equality of women. Women enjoy the right to independent Property, to Freedom in marriage, education and employment. The Change to status of women reflects the general awakening of women themselves It also makes reintegration of social relationships and creation of a new code of laws, a new morality and a new principle of family organization.

Measuring Sticks- Women's security, decision-making power, and mobility are three indicators for women's empowerment. In India, and more so, for rural and less educated women, the three indicators are significantly low. Data from the NFHS-3 Survey on women's decision making Power shows they only about one third of the women interviewed took decisions on their own regarding household and their health. Decision-making Power among employed urban women was higher than among rural and less educated women. The survey also found that older married women had more decision-making power than the younger married women. Younger women and girls experience an additional layer of discrimination as a result of their age.

Data on women's mobility in India indicates the lack choices women have, and that when and educated women have more mobility choices than rural women. Mobility restrictions for women are dependent upon how the family and community view women's Rights. They also however,

are intrinsically dependent on the prevailing levels of violence against women in the household and Community. Abuse and Violence towards women is predominantly perpetrated within the house hold, and marital violence is among the most accepted by men and slapping, clashes, abuse, violence and trafficking, Permeate the Indian social fabric, and break one of the most serious obstacles in achieving women's development and growth in society.

The gap in Policy and practice in women's development is most visible, when it comes to the level and kinds of Violence homes fall in India. Despite the Policies, Laws, and initiatives by civil society institutions, Violence against women in India is widespread and the consequences for Perpetrators rarely match the Enforcement of laws and sentencing of perpetrators are long and arduous Processes, and the gaps in these processes are further widened by corruption.

Another gap in implementing laws and policies on violence against women is the inaccessibility of information on victim's rights among rural and less educated women. Additionally, social stigma and the fear of abandonment by the family play a big toll in women and guilt's ability of inability to access laws and Policies to address abuse and physical violence.

All these gaps can be patched up only when women themselves are aware of their rights and positions. They must have an instinct to exploit themselves and inculcate thoughts and ideas in them to remove or overcome hurdles and way to their welfare and uplift.

Present Status of Women- The family in India, including Bihar, is largely Patriarchal, in which the core of the family is the male and the women are brought as brides into the family. The tasks of running of the house hold are shared between the women with the youngest bride shouldering the heaviest burden. The older women are the role of controlling the younger women and enforcing the qualities of docility, obedience and submissiveness.

The devaluation of women commences at birth itself with the preference for male offspring as the natural success of in the Patriarchal family. The birth of a son is celebrated as the means of support in old age, while the birth of a daughter, is viewed as placing a heavy burden on the family to raise the necessary dowry for her marriage and for other functions. A daughter is considered. I another's Property and hence any investment in the development is regarded as fruitless. This leads to discrimination in the allocation of resources- nutrition, medical care, education, etc - between the boy child and girl child in the family.

The Problem of dowry is one of the most important issues in the important movement in the country. As the demands for dowry continue to grow, so does the harassment of young brides by their husband's family for a continuous flow of gifts and cash and the mobility to comply unleash violence and abuse. It is, however, a difficult problem to tackle through the law as it relates to the domestic sphere and to the private lives of women and domestic violence family is treated as a family affair.

Economic Role of Women- The Position of women in the social structure affects the way they are regarded in their economic roles as well. First, it has resulted in a pervasive division of labour, which reinforces the notion of the male having more power and relegates low status occupations to women. In doing so it leads to a waste of female potential and ignores individual differences in capacities and abilities which each one of either boy child of girl child in the family. Once occupational on task segregation takes place, it tends to be retained against all other rational Criteria.

Second, having defined women as solely responsible for Family Care, their incursion into the labour market, made inevitable by inadequate incomes of males absence of male earners, is at certain levels seen as deviant behaviour, of results in the pervasive notion of the women workers as a supplementary earner irrespective of the total resources contributed to the household or the time and energy spent.

Thus a women, who earns as much as 50% or sometimes 100% of the household income is still regarded as a supplementary earner. And almost in all cases and is all levels (except to a large extent in the organized sector, which accounts for a very small Percentage of women) they do not get equal wages for equal work, not do the conditions of work offered to them take into account their dual roles. The need to combine productive work with their reproductive role and family responsibilities meant that a women; choice of work is often dictated by what is feasible and easily available. Need for this flexibility is frequently exploited by the labour market and is easily used as another excuse to pay low wages to workers women.

Women in addition, have virtually no control over the family assets. In the majority of cases and is in the name of the male head the household. The women also have no control over, of access to other means of Production necessary for agricultural Operations like Plough and draught animals, which are the men's possessions. The same is true to other agriculture implements and tools, like harrows, sowers, carts, etc the only tools and implements in the possession of women are baskets and winnowing fans. In the changing status of women, the main goals are to organize women workers for full employment and self reliance full employment means employment, whereby workers obtain work Security, income security and social security (at least health care, Child Care and shelter).

Women's Rights - Public and Private Sphere Divide-

Because women are defined in most human rights instrumentally in terms of their child bearing and familial responsibilities, and because the family, which is a site of violence and oppression for many women, who continues to be described as the primary cost of Society, there are severe limitations on the possibility of all or day equal treatment to women within the existing human rights regime.

The division between the "Public" and "Private" spheres constitutes the foundation for all forms of

discrimination against women. In the so-called Private arena, the equal treatment of women remains extremely controversial. The Primacy of women's biological and reproductive roles in defining her identity and her role in society is reinforced by social and cultural norms the world over. Critical areas of human life" such as marriage, divorce, maintenance, Custody of Children and inheritance continue to be determined according to religious, traditional and customary Practices in many countries: Abuse and domestic violence are perceived as "Private" matters and therefore "outside" the purview of the law. These attitudes are also articulated through many varied legal systems and frame link.

Given this contest, women's capacity to enjoy economic and social rights is often construed by economic dependence and social attitudes that affirm her Secondary and Subordinate Status in society.

Women's Rights - Norms and Standards- The Principle of non-discrimination is a cornerstone of human rights Principles. Discrimination based on gender is among the forms of discrimination Prohibited. This prohibition is enshrined in the Universal Declaration of Human Rights. The commitment to nondiscrimination was clearly reiterated by the international Community in common article of the two International Covenants on Civil and Political Rights and on Economic, social and cultural rights.

Human Rights and Women's Rights- The Universal Declaration of Human Rights, adopted in 1948 enshrines "the equal Rights of men and women", issue of in 1979 the United Nations General Assembly adopted the Convention on the Elimination of All forms of Discrimination against women (CEDAW) for legal implementation the Declaration on the Elimination of Discrimination against women. Described as an international bill of rights for women, it came into force on 3rd September, 1981.

The Convention defines discrimination against women in the following terms: Any distinction, exclusion or restriction made on the basis of gender, which has the effect

purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on basis of equality of men and women, of human rights and fundamental freedoms in the Political, economic, social, Cultural, Civil or any other field.

It also establishes agenda of action for putting an end to gender based discrimination form which states ratifying the Convention and required to enshrine gender equality into their domestic legislation, repeal discriminatory provisions in their laws, and enact new provisions to guard against discrimination against women. They must also establish tribunals and Public institutions to guarantee women effective Protection against woven by individuals, organizations, and enterprise and may accept degrading working conditions during times of crisis, just to ensure that their families survive.

Conclusion- In the conclusion by analysis of the changing status of women Indian society, we can opine by implementation of many welfares schemes and other programmes there is a lot of progress of girl child and women, and in the social upliftment not only in urban India but also in rural India and countryside. Promoting and protecting the rights of provides a unique opportunity to link with strategies for defense of Civil and Political rights. It also challenges many existing assumptions regarding women's role in society and can lead to Substantive changes the unequal between men and women.

One strategic area of work for the Promotion of women's economy and social rights is that of building alliances between women's rights groups and human rights groups. In addition, it is important to support linkages between women's groups and other social movements that work in the area of economic and social justice Trade unions, women's organizations, groups working for media and cultural freedom, environmental rights groups, groups working for the rights of girl child and women should become natural allies with is work. Bringing a gender-sensitive

approach to the work of these various groups, however, remains a major Challenge.

At present the changing status of girl child and women can be seen as positive in all the states of India. It is seen that there is a lot of Progress in the field of wellbeing, welfare and development of girl child and women in society.

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The Evil of Female Foeticide in India: Causes, Consequences and Prevention

• Dr. Akhilesh Shukla

Female foeticide is the selective abortion/elimination of the female child, done deliberately by the mother, after the detection of the child's gender through medical tests. This is usually done under familial pressure from the husband or the in-laws or even the woman's parents. Abortion of female foetus is called female foeticide. This is a major social problem in India and has cultural connections with the dowry system that is ingrained in the Indian culture, despite the fact that it has been prohibited by law since 1961. In India, unlike any Western culture, strong preference for sons over daughters exists. Pregnancies are planned by resorting to differential contraception - contraception is used based on the number of surviving sons irrespective of family size. Following conception, foetal sex is determined by pre-natal diagnostic techniques after which female foetuses are aborted. Foetal sex determination and sex- selective abortion by medical professionals has grown into 1,000 crore industry (US\$244 million). Social discrimination against women and a preference for sons have been promoted. Since 1991, 80% of districts in India have recorded an increasingly masculine sex ratio with the state of Punjab having the most masculine sex ratio. According to the decennial Indian census, the sex ratio in the 0-6 age group in India went from 104.0 males per 100 females in 1981, to 105.8 in 1991, to 107.8 in 2001, to 109.4 in 2011. The ratio is significantly higher in certain states such as Punjab and Haryana. This process began in the early 1990s when ultrasound techniques gained widespread use in India. There was tendency for families to continuously produce children until a male child was born. This was

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primarily due to the large sexist culture that exists in India against women. This is reflected by literacy rates among women as well as economic participation, which are both particularly low in states where female foeticide is prominent and an unequal population ratio exists alongside. The government initially supported the practice to control population growth. The Preconception and Prenatal Diagnostic Techniques (PCPNDT) Act was passed in 1994, making sex-selective abortion illegal. It was then amended in 2003 holding medical professionals legally responsible. However, the PCPNDT Act has been poorly enforced by authorities.

Violence against women exists in various forms, in all societies, the world over. However, the recognition that elimination of gender-based violence is central to equality, development and peace, is recent. In India, the landmark report on the status of women 1975 didn't deal with this issue. In late seventies and eighties the Indian women's movement focused on the issues of dowry deaths, female foeticide, sati, rape and other forms of violence. In 1996 the world health assembly endorsed the fact that violence against women is a Public Health problem and female foeticide is one extreme manifestation of violence against women.

Introduction- Some of the worst gender ratios, indicating gross violation of women's rights, are found in South and East Asian countries such as India and China. The determination of the sex of the foetus by ultrasound scanning, amniocentesis, and in vitro fertilization has aggravated this situation. No moral or ethical principle supports such a procedure for gender identification. The situation is further worsened by a lack of awareness of women's rights and by the indifferent attitude of governments and medical professionals. In India, the available legislation for prevention of sex determination needs strict implementation, alongside the launching of programmes aimed at altering attitudes, including those prevalent in the medical profession.

Background- The killing of women exists in various forms in societies the world over. However, Indian society displays some unique and particularly brutal versions, such as dowry deaths and sati. Female foeticide is an extreme manifestation of violence against women. Female foetuses are selectively aborted after pre-natal sex determination, thus avoiding the birth of girls. As a result of selective abortion, between 35 and 40 million girls and women are missing from the Indian population. In some parts of the country, the sex ratio of girls to boys has dropped to less than 800:1,000. The United Nations has expressed serious concern about the situation.

The sex ratio has altered consistently in favor of boys since the beginning of the 20th century (see Table), and the effect has been most pronounced in the states of Punjab, Haryana and Delhi. It was in these states that private foetal sex determination clinics were first established and the practice of selective abortion became popular from the late 1970s. Worryingly, the trend is far stronger in urban rather than rural areas, and among literate rather than illiterate women, exploding the myth that growing affluence and spread of basic education alone will result in the erosion of gender bias.

One of the greatest threats to our contemporary civilization is the menace of skewed sex ratio. The increasing imbalance between men and women is leading to many crimes such as illegal trafficking of women, sexual assaults, polygamy and dehumanization of society. These acts have been increasing making this world unsafe for women. Female foeticide is one of the most nefarious crimes on this earth; perhaps what is detestable is that the people who commit crime belong to the educated class. To this menace our ancestral and biased view about male child, lack of education, ever increasing population and dowry have been good propellants. Some measures and their enforcement have to happen immediately. The ineffectiveness of the Pre-Natal Diagnostics Techniques (Regulation and Prevention of

Misuse) Act is very much evident. Hence there needs to be quick reformation in the attitude of people to look beyond the legacy and transform this world as a better place to live in.

Among various women related issues in India, the female foeticide and female infanticide has become one of the social problem. The advent of technology and misuse of pre-natal sex detection and also attitude of the unscrupulous medical practitioners, who are facilitating the female foeticide through induced abortions. There are strict laws and penal actions against violators, but the laws have not worked. Over 10 million female foetuses have been aborted in India in the past two decades. The Sex Ratio in the country has shown an improvement. As per the Census, sex ratio has increased from 933 females per thousand males in 2001 to 943 females per thousand males in 2011. State/UT-wise details of sex ratio are annexed. The sex ratio as per 2001 census the females are 933 per 1000 males. Although a marginal improvement of six points in the overall female to male sex ratio in India? from 927 in 1991 to 933 in 2001? Is an encouraging development, the massive decline of 18 points in the juvenile sex ratio (age group of 0 to 6)? From 945 to 927 in the country after 1981? is what shows the extensive female foeticide in India. It is pertinent to note that the figures show the fall in the juvenile sex ratio is much higher in the economically developed States in India. There is steep fall in sex ratio in States like, Punjab, Haryana, Gujarat and Maharashtra, along with the Union territories of Delhi and Chandigarh. In Punjab there are only 874 females per 1,000 males. The situation in Haryana, Gujarat and Maharashtra is also similar - the females are 861, 921 and 922 respectively per 1,000 males. Kerala is the only State was females are 1,058 per 1,000 males. The following is the sex ratio chart from 1901 to 2001.

Year	Sex Ratio(Females per 1000 Males)
1901	972
1911	964
1921	955
1931	950
1941	945
1951	946
1961	941
1971	930
1981	934
1991	927
2001	933
2011	943

India cannot afford to wait till the next census in 2011 to determine whether the growing practice of female foeticide and the girl child mortality rate had gone up. In India the reason behind in rise of female foeticide is because of the strong son preference in society, universalisation of the small family norm, practices like tradition of giving dowry (gifts by father of bride in cash or property to the groom), laws that govern property inheritance and the cultural perception about the familial name through the male line. The mortality of girl child is also high because of parental discrimination against their daughters in terms of health care and nutrition. Foeticide i.e a crime against a foetus, is a crime against children as per Section 315 and 316 of Indian Penal code. A very few people reports this crime in police stations. We have found that *a total of 96 cases of Foeticide were reported in the country during 2007 as compared to 125 in the year 2006 indicating a significant decline of 23.2% in these cases.* Punjab has reported the highest number of such cases (35) followed by Rajasthan (16). These two States together have accounted for 53.2% of total such cases reported in the country. It is a matter of grave concern that today in India we are discussing a thing like female foeticide. This term in itself envelopes myriads of meanings, it smacks of the fact that (a) a girl is killed before

she is born; (b) that sex of a foetus is determined to be that of a female; (c) it acknowledges that there is technology privy to this heinous crime; (d) there are doctors involved in first determining the sex of the baby, then carrying out abortion; and (e) there is crime involved in violating not one but many laws: the Pre Natal Diagnostic Techniques (Regulation and Prevention of Misuse) 1994 Act, the Section 307 IPC (of attempt to murder) and along with crime of abetment of murder etc. THE Supreme Court's directive to the government to implement the provisions of the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act banning sex determination tests and sex selection to prevent female foeticide is timely. The court has been closely monitoring the implementation of its various orders passed since May, 2001, regarding the ban on the use of ultrasound scanners for conducting such tests. Subsequently, it had sought status reports from all states and Union Territories. It had ordered compulsory registration of all diagnostic centres across the country. There was impasse in Parliament over the Bill on sex determination tests. The Indian Radiologists' Association wanted a clear distinction between clinics, which were engaged in diagnosis for gynaecological purposes, and those for non-gynaecological purposes such as kidney and liver problems. Parliament finally passed the Bill.

However, doubts are bound to be raised on the effectiveness of the legislation as the issue mainly relates to people's attitudes and preferences. The desire for a son, for instance, is deep-rooted in both rural and urban areas. The problem of dowry and the choice of a son for social security have also contributed to the malady. However, these have led to serious gender discrimination and adverse demographic implications in many states. For instance, according to an estimate, parts of Haryana have witnessed a dip in sex ratio — 618 girls for 1,000 boys. On the whole, while the national sex ratio is 933 per 1,000 men, in Haryana, Punjab, Chandigarh

and Delhi, it is below 900. This shows that the menace has reached alarming proportions even in urban areas.

The Act prohibits determination and disclosure of the sex of foetus. It also prohibits any advertisements relating to pre-natal determination of sex. Following the apex court's orders earlier, appropriate authorities with powers of civil court have been appointed. These were empowered to prosecute the clinics and the doctors if they used ultrasound technique for sex determination. A committee has also been constituted at the national level to monitor the enforcement of the Act through field visits. However welcome these provisions are, legislation alone will not help check female foeticide. What is of utmost importance is a change in the people's attitude. The preference for a son must go if the larger problem of female foeticide is to be tackled. It speaks of a whole system gone corrupt, a whole society involved in conspiracy against women, against destruction of half the population of society, at the hands of monstrous practices becoming more and more rampant in a society fast losing its secular, social, and humanistic fabric. In today's materialistic world a woman is fast being relegated to the rank of a commodity and marriage has become more of a business alliance than a sacred bond between two people. Amniocentesis first started in India in 1974 as a part of a sample survey conducted at the All India Institute of Medical Sciences (AIIMS), New Delhi, to detect foetal abnormalities. These tests were later stopped by the Indian Council of Medical Research (ICMR), but their value had leaked out by then and 1979 saw the first sex determination clinic opening in Amritsar, Punjab. Even though women organizations across the country took up cudgels to put a stop to this new menace, but were helpless because of the Medical Termination of Pregnancy Act. This is because the amniocentesis test was claimed to be used for detection of foetal abnormalities, which were permitted by the MTP Act. According to the MTP Act, if any abnormality is detected

between 12 to 18 weeks of gestational period in the foetus, an abortion can be legally carried out up to 20 weeks of pregnancy.

In the absence of any law, all that the government could do was to issue circulars prior to 1985, banning the misuse of medical technology for sex determination in all government institutions. This, however, led to the mushrooming of private clinics all over the country. In 1986, the Forum against Sex Determination and Sex Pre-selection (FASDSP), a social action group in Mumbai, initiated a campaign. Succumbing to public pressure, the Maharashtra government enacted the Maharashtra Regulation of Pre-Natal Diagnostic Techniques Act 1988, the first anti sex determination drive in the country. This was followed by a similar Act being introduced in Punjab in May 1994.

Both these were however repealed by the enactment of a central legislation, the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 28 September 1994, which banned sex determination tests all over the country. This Act carries a three-year imprisonment and Rs10,000 fine for offenders. The implementation of this act initially faced problems as monitoring agencies had to be identified at all levels. It was therefore only in 1997 when the responsibility was delegated, that actual implementation of the act began.

There is still social complacency among all sections of society, which needs to be addressed. Since the advent of ultrasound and detection technique for sex-determination 10 million female foetuses have been aborted in India, according to a study conducted recently in India, the first systematic study on female foeticide by an Indo-Canadian team. A shocking picture emerges-every year, about 50,000 unborn girls-one in every 25-are aborted and as a result the number of girls has actually gone down drastically in India.

In 1997 UNPFA report "India towards Population and Development Goals", estimates that 48 million women were

'missing' from India's population. The report states "If the sex ratio of 1036 females per 1000 males observed in some states of Kerala in 1991 had prevailed in the whole country, the number of would be 455 million instead of the 407 million (in the 1991 census). Thus, there is a case of between 32 to 48 million missing females in the Indian society as of 1991 that needs to be explained." The 1991 census is only indicative of this disturbing trend when elsewhere in the world women outnumber men by 3 to 5 percent. There are 95 to 97 males to 100 females in Europe; the ratio is even less, 88 males to 100 females, in Russia, mainly due to casualties of World War 2.

According to the UNICEF, 40 to 50 million girls have gone missing from Indian population since 1901 as a result of systematic gender discrimination in India. As per consensus 2001, the child ratio in Punjab is 793 girls to 1000 boys. This is the lowest child ratio in the country (the average being 927 girls to 1000 boys) and as compared to 1991 consensus it shows a decline of 82 points. India tops the list as far as illegal abortion and female foeticide are concerned. Of the 15 million illegal abortions carried out in the world in 1997, India accounted for 4 million, 90% of which were intended to eliminate the girl child.

Terming female foeticide as a "shame" on Indian society, Prime Minister Manmohan Singh said that the country cannot progress unless women become equal partners in growth. "It is very sad that in our society, the girl child is being killed even before being born. This is a shame on our society," Singh said addressing the nation from the Red Fort on the 63rd Independence Day. "As soon as possible we have to remove this blot. Our progress will be incomplete till women become equal partners in the growth," he said. Asserting that the government was committed towards providing 33 per cent reservation in the Parliament, Singh said, "We are trying to make a law through which women will be given 50 per cent reservation in rural and local bodies so that they get equal representation". The Prime Minister also

announced the launch of a National Female Literacy Mission with an aim to reduce female illiteracy by half. He said special care would be taken of needs of women and children and added that the Government has decided to extend the benefit of ICDS to every child below the age of six years by March 2012.

Female foeticide is now more widespread in the country than ever before. The practice was restricted to few states a few years ago has now spread all over the country. Girls and women not only face inequity and inequality, they are even denied the right to born if their families do not wish so. In fact many families do not wish their women folk to deliver baby daughters.

The Declining Sex Ratio- one of the sensitive indicators of boy preference is the sex ratio. The record shows that the sex ratio or the number of females for each thousand males has gone down consistently over the past decades. In this study I took the interview of 100 people of Rewa city and found that the following factors are responsible for female foeticide-

1. Social Security- Consequent upon the advances in medical science, the termination of unwanted children especially female foetuses through abortion has become common in families to satisfy their preference for sons.

2. Evil of Dowry- Some people think, a girl means accumulation of sufficient resources for the dowry the parents have to give away, when the girl gets married. Therefore, the parents think that the girl is a financial burden for them, where as the boy is an asset who fetches a fabulous dowry for the parents.

3. Financial Dependence of Females on Husband or In laws- In India socio-economic background has been the villain behind the tragic female foeticide. Certain communities want to get rid of female child compelled by the circumstances of dehumanizing poverty, unemployment, superstition and illiteracy.

4. Cultural Factors- the concept of 'Vanshodharak' a male child to perform last rites in Hindus and carry forward Measures to Reduce Female Foeticide.

Confronted with this situation, it is high time to take preventive measures against female foeticide. Both local leadership and Govt. agencies should plan a concerted long-term programmed aimed at the educational and socio-economy is advancement of the community, e.g. by social welfare and poverty alleviation programmers, to improve the economic status of women. To wean the people away from the traditional practices, voluntary organizations should come forward to promote social education and awareness among the people through cultural programmers and public debate etc.

The practice of dowry, at the time of marriage should also be eliminated through education and concept of equality of sexes. Adult education has to be promoted. Laws relating to coil ferment of equal rights with regard to parental property should be implemented in the right spirit so that the stigma of liability attached to girlhood and womanhood could be eradicated forever.

It is a challenge today to initiate a vibrant, effective campaign against female foeticide. Organizations and individuals with different priorities and ideological beliefs have to rally together to battle powerful patriarchal forces operating with in the institutions of the family and civil society.

However the national law against prenatal diagnostic technique (regulation and misuse) Act of 1994 is a positive step which enabled the National Human Rights Commission to direct the Medical Council of India to take action against doctors found abusing prenatal diagnostic techniques. There is a need for sustained campaigning and active monitoring of the act. State Governments should realize the importance and priority of the law and not merely treat it with their usual complacency. Structures for implementation of the 1994 law

need to be created at the District level. Volunteers have to be actively mobilized to monitor registration and functioning of sex determination clinics at different districts. Cases have to be filed against the violators and social consciousness has to be raised against the crime.

Members of the society and the religious leaders have a positive role in creating a morally reformed society. The long-- term task is to foster a culture of goodness and human dignity which inoculates individuals and institutions against the infection of this despicable human practice. The role of the Akal Takht in Punjab is worth mentioning. The apex religious organization of the Sikhs has issued directives to the community not to indulge in the inhuman and immoral practice of female foeticide and to take stern action against those who would violate this direction i.e. offenders would be ex-communicated. Almost all communities have organizations similar to the Akal Takht, if they made a concerted effort to educate their flock, and if need be boycott those guilty of this crime. a radical social change could come about. “Yatra Naranthya Pujyathe Raman The Tatra Devatha” has been our culture. In our country a girl is worshiped as a Devi on one hand and denied her existence on the other as if she has no right to live. Time has perhaps come for us to get rid of male chauvinism and treat children as gifts of nature regardless of their gender. We cannot imagine a society in the future where there will be only males and no females. The society will be full of crimes and evils. Only if legislations enacted in this behalf are not sufficient. Orthodox views regarding women need to be changed. The PNDA Act should penalize and punish the violators of this crime strictly. The pernicious acts of female foeticide and coercive abortions have to end before women becomes endangered species. Here are some ideas to prevent female infanticide and female foeticide. The removal of this practice in Indian Society is a serious challenge.

Causes-

1. The root cause of female foeticide is the dowry system in our society. A number of girls are killed inside the womb due to fear of dowry by many poor class families. They are worried about giving the dowry during the marriage of their girls, which poor people can't afford.
2. Girls are considered as financial obligation by many parents. They conceive that money spend on a girl will be total waste as she will go to her in-law's home after the marriage. According to Hindu's mythology, birth of a boy is considered as path to
3. heaven. Being trapped in such orthodox ideas the girls are put to death before their birth.
4. The other root cause of female foeticide is rise in the inflation. Due to rise in inflation parents think hundred times before giving birth to a girl child. They worry about the educating and marrying their daughter.
5. The advancement in technology is the major cause of female foeticide. Nowadays parent determines the sex of a child before birth and kill if not according to their choice.
6. Corruption is another major factor in the rise of female foeticide. Some of the doctors do this heinous act to fulfill their moneydesire³.

Consequences and Social Effects of Female Foeticide-

These include increased gender disparity, a high sex ratio, lives lost, lack of development, and abuse and violence against women and children. Due to female foeticide there is steep decrease in the female's population. Due to which it is becoming difficult to find girls for marriage. This in turn leads to girl's trafficking. According to news girls from Assam and West Bengal are kidnapped and sold in Haryana for marriage, where the child sex ratio is least in the country. Due to

diminution in the female's population our society is becoming male dominant, which is not a good indication. As the decrease in number of women, men consider themselves more superior and above law, which in turn results in women's exploitation. Female foeticide has led to an increase in human trafficking. In 2011, 15,000 Indian women were bought and sold as brides in areas where foeticide has led to lack of women.

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Second Wave Feminism and Feminist Philosophy: Global and Indian Contexts

• Sanjay Nath
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Feminism can be defined as political, cultural and economic movements aimed at establishing greater rights and protection for women, as well as movements that campaign for women's rights and interests. Feminist theory emerged from these feminist movements and is manifest in various disciplines. Feminism has changed traditional perspectives on a wide range of areas in human life, from culture to demography, geography, history, literature, sociology and law. Feminists are persons who believe in feminism. Feminists are divided over whether men can be feminists, so while some allow men to be described as feminists, others prefer to call them Profeminists.

The history of feminism in Western Europe and North America can be divided into three waves. The first wave appeared in the nineteenth and early twentieth century's, the second in the 1960s and 1970s and the third from the 1990s to the present. Whereas first wave feminism focused on absolute rights such as suffrage, second wave feminism was primarily concerned with other equality issues, such as the end of discrimination. The third wave movement arose as a response to the perceived failures of the second wave. It also responded to the backlash against initiatives and movements created by the second wave. Third wave feminism seeks to challenge the second wave 'essentialist' definitions of femininity, which they said were based upon the experiences of upper

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middleclass white women. This trend accelerated in the 1960s with the civil rights movement in the United States and the collapse of colonialism in Africa, the Caribbean, Latin America and South East Asia.

Second wave feminism emerged, after the Second World War, in several countries. In 1947, the United Nations set up a Commission on the Status of Women which issued a Declaration of Human Rights. It acknowledged that men and women had 'equal rights as to marriage, during marriage and at its dissolution, as well as women's entitlement to special care and assistance in their role as mothers'. A remarkable variety of Western women picked up their pens. One of the most influential was, and remains, the French writer Simone de Beauvoir. In *The Second Sex* (1949), she famously wrote: 'One is not born, but rather becomes, a woman'. There are vast implications of this statement, the crux of which is a difference between being anatomically female and becoming what society recognizes as a woman. What we are as women we become, formed by oppression, being defined in relation to men as other, different. Second-wave feminists adopted and adapted De Beauvoir's reasoning that women's oppression lay in their socially constructed status of other to men. The term 'second wave' describes the increase in feminist activity in America, Britain and Europe from the late 1960s onwards.

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The women's liberation movement in America, Britain and Europe dubbed the society as male-dominated-men define and legislate women's place in society. The stereotyped image of women as inferior to men and feminine-passive, emotional, dependent and non-masculine- defines women only in relation to men. This manufactured image of a woman both legitimises and conceals individual and institutional violence of men against women and suppresses attempts at the conception of female power, female resistance and female bonding. Simone de Beauvoir argued that women must come to full consciousness by opposing men as men have opposed women and made men the Other. Beauvoir was always opposed to any feminism that championed women's particular virtues or values, firmly rejecting any idealisation of specifically 'feminine' traits. She argued that supporting that kind of feminism would imply agreement with a myth invented by men to confine women to their oppressed state. For women, it is not a question of asserting themselves as women but of becoming full-scale human beings.

Although many feminists have criticised de Beauvoir's individualism and her vision of liberation, they have emphasised creating for women alternatives to a life of suppression and subordination by resistance to the law and languages of their oppressors. More significantly, many feminist thinkers argue that enduring alternatives cannot be created; rather, they have to be continuously created through the creation of 'selves' or identities independent of the oppressors and their agenda. Though much of de Beauvoir

has been rejected, many of her themes endure:

The theme that selves are continuously created.

The idea that making of selves is mortally risky and requires existential courage.

The recognition that if you fail to create yourself, you will collapse into someone else's creation.

The idea that in making one's self, one is creating value.

Unlike most other systems of oppression and exploitation, the oppression of women is hard to perceive because its mechanism is complex and covers a whole life span of a woman. It operated in the realms of learning languages, being schooled, being inducted into religious practice and community, and being on the receiving end of marketing, advertising, commerce and entertainment.

Other works- Beauvoir's account of the cultural construction of woman as Other laid the foundations for much of the theoretical work of the 1970s. Betty Friedan's *The Feminine Mystique* (1963) has been seen as heralding feminism's second wave. Kate Millett's *Sexual Politics* (1970), Shulamith Firestone's *The Dialectic of Sex* (1970), Germaine Greer's lively and provocative *The Female Eunuch* (1970), Sheila Rowbotham's *Liberation and the New Politics* (1970), Juliet Mitchell's *Woman's Estate* (1971), Susan Griffin's, *Pornography and Silence* (1981), Naomi Wolf's *Fire with Fire* (1983), Stokely Carmichael's *Feminist Theory: From Margin to Centre* (1984), Natasha Walter's *The New Feminism* (1998), and Lynne Segal's *Why Feminism?* (1999), are remarkable second wave outputs. Their thoughts and critiques on the women's questions and status have crystallized into a philosophy which may be called feminist philosophy. The bare outlines of this philosophy are traced here.

Consciousness-raising- Consciousness-raising was a primary tactic of second wave feminism which was a move to transform what is experienced as personal into analysis in political terms with the accompanying philosophy that 'the personal is political'. The belief was that male power was

exercised and reinforced through 'personal' institutions such as marriage, child-rearing and sexual practices.

In the second half of the twentieth century, in the USA, feminists began to establish consciousness-raising groups in which women talked with each other about their personal lives. They talked about sex, work, marriage, motherhood, childhood experiences, and health which led to the recognition that women's lives are heavily laced with sexism. Consciousness-raising is a strategy to perceive the problem first because patterns of social power and modes of oppression are often concealed in myriad ways. For example, patterns of power and modes of oppression may be obscured by language void and historical erasure and by being censored or manipulated into silence. Feminists took up the call for equal rights to bring the male order into conformity with its ideology. They argue that sex differences do not justify civil discrimination and insist on women getting equal opportunity, benefits and protection under the law. This liberal-feminist demand confirmed the subordinate status of women in a male-dominated world. They also alleged that men divided society into public and private spheres, establishing men's political rights over women and their access to and use of women's bodies and labour in the private sphere.

Capitalism- Feminists point out that demanding equality with men paradoxically endorses men's actions as the desired norm to be followed. Furthermore, it validates the structures and stratifications of western liberal industrial capitalism. This system grew on colonialism, genocide and slavery; it works by extraction of 'surplus value' from workers' labour. Worker exploitation is facilitated by assigning women to lower status and pay and maintaining an unacknowledged substratum of women's unpaid labour in the 'private' sphere of the home, subsistence production and child-care. This requires the subordination in various ways of women of all races and places, even women of aristocratic and owning classes. The system also requires that males control the

reproduction of a population of workers and consumers, which they do in part by regulating women's sexuality, fertility and child-rearing.

Capitalism is a 'system of stratification, inequality, exploitation and oppression. It is neither structurally possible nor morally defensible for all women to have the rights and privileges such a system gives those at the top. For the oppression of women to end, there must be entirely different structures. It is noted that male violence against women transcends the material or economic requirements of capitalism; it appears to maintain male dominance as an end in itself. They argue that there is a declared war on women, which manifests in assault and murder, rape, child sexual abuse, sexual harassment, medical abuse, etc. Some feminists argue that rape is a terrorist institution, benefiting men because it keeps women believing they need men for protection. Others focus on the misogyny that permeates men's entertainment and argue that pornography eroticizes rape and abuse, solidifying the connection between sex and violence.

Sexuality and female body- Feminism is crucially concerned with the ways women's bodies are controlled within a patriarchal system, which regulates women's access to such services as contraception and abortion. In the twentieth century, emphasis has been placed on contraception as controlling population growth rather than a means of liberating women. However, responsibility for contraception has continuously been placed on women, with an accompanying increase in medical intervention. Birth control clinics started in the 1920s and free contraception in 1974. Feminists welcomed the degree of control over fertility, especially since the invention of the Pill, but also criticized the responsibility and medical risks involved.

Feminists also see female heterosexuality not as a biological given but as a social construct made to seem natural. For them, heterosexual practice is at the root of women's subordination to men. In her widely read essay

'Compulsory Heterosexuality and Lesbian Existence' (1980), Adrienne Rich argues that heterosexuality has been forced on women by a patriarchal system that seeks to convince them that 'marriage and sexual orientation towards men is inevitable'. This ensures that lesbian sexuality is considered deviant and unsocial. Feminists believe that the institution of female heterosexuality is a device to secure individual women's unpaid services to individual men essential to the structures of domination (capitalism, colonialism, etc.). They say the institution is grounded in men's very definition of woman—woman is defined as what turns men on. By these definitions, lesbians are not women. Others note that female heterosexuality works politically to separate women from each other, inhibiting their solidarity and bonding in resistance.

Feminist philosophers generally reject any biological determinism according to which the oppression of women might be explained or justified as a natural consequence of anatomical configurations and functions of male and female human bodies. Perhaps as a result of the desire to avoid any hint of such biological determinism, a good deal of feminist philosophy neglects the female 'sexedness' of our bodies, leaving it unremarked and not integrated into the theories, except in connection with critiquing or revaluing motherhood. But some feminists are very concerned with female bodies, sensual pleasures, physical eroticism and sexuality, independently of their connection with reproduction. It is suggested that a fundamental process of the oppression of women is the suppression, indeed annihilation of autonomous female sexuality. Eroticism is neither related to male/men/masculinity nor reproduction. The suppression of autonomous female eroticism is vividly enacted in the erasure of the lesbian alternative or its co-optation in pornography. Many feminists have argued that making lesbian eroticism a real and practical option for all women is essential to the liberation strategy.

One way to combat male domination of women is to use separatism as a lens through which they perceive the world in their way. They separate in one way or another from patriarchal values-humanism, masculine notions of rationality, gender roles, individualism, for example—to free up feminist imagination from men's agendas and construct new values in new frameworks.

Victim and victimism- A good portion of feminist theory starts from understanding themselves as victims. Before feminist activism, rape, wife-beating, incest and sexual harassment were all considered private and personal matters and a woman's fault. Much feminist work involves articulating ways men victimize and then blame women. However, by the mid-1970s, feminists noted that they must avoid blaming the victim and victimism—the perception of a woman as only a victim and not a resister. Women's agency and ability to act are compromised overtly by men's violence, imposed barriers to movement, and covertly by male-oriented conceptions of female virtue. Feminist challenges socially prescribed feminine virtues such as nurturance and volunteerism and argue that in masculine discourse, the traits defining women's goodness mark them as morally deficient and have undertaken to revalue stereotypical feminine traits. For example, nurturing has not cured the violence in women's lives; a woman's misplaced gratitude towards men for taking less than full advantage may be mistaken for care, and misplaced gratitude is a form of moral damage. Women have developed these skills and capacities to survive under patriarchal domination; it does not mean they are timeless virtues.

White feminism and black feminism- There has been a racial streak in the feminist movement in the West. Women of colour have continuously challenged white feminists. They point out that dominant western conceptions of womanhood have excluded black women from the definition of woman and femininity. Arguing that black feminism has distinct origins, theorists articulate the interrelatedness and

simultaneity of oppressions. Feminists say that black women face specific problems in resisting capitalist male domination and have different cultural sources of resistance. Feminists decry finding themselves in someone else's discourse or story, either in a picture that distorts their lives because of hidden cultural assumptions or in silence because they have ceased trying to fit into the dominant context.

Further, they argue that when white feminists insist that women must work with men, they align themselves with white men, their connections with women of colour being at best distant and lacking the revolutionary intents. Thus their analyses are too simple, failing to acknowledge the differences in the situations of women of colour. In not reaching toward women of colour, they acquiesce, for example, to black men's assuming the right to define black culture.

Feminist movement in India- Although the period from the thirteenth to eighteenth centuries abounds with the activities of the saint poets and poetesses of the *bhakti* movement, the nineteenth century in India stands out as the era of social reform. Much of this reform movement centred on issues such as the abolition of child marriage, establishing the right of remarriage to upper-caste Hindu widows, and women's education. Gradually, the western idea of liberty, equality and fraternity was extended to the women's question and made it an essential part of the Indian social reform movements. The Indian social reformers shared the belief common to feminism in the nineteenth century that no society could progress if its women lag behind the men. The reformers directed their efforts to the overall improvement of women through legislation, political action and propagation of the idea of women's equal rights. Although they did not challenge the existing patriarchal structure of the society, they tried to create a new Indian woman, sufficiently educated and tutored in the nineteenth-century values to suit the contemporary emerging society. Mahatma Phule(1827-1890) was considered the first Indian activist who took up the cause of

women in India. One of his important works was to open a school for girls in 1848. The school brought together girls of all castes, including the untouchable girls, under one roof. He also took the initiative to open a home for the widows of wealthy classes whose families did not accept them on the often fabricated charge of illicit sexual activities.

Although the nineteenth-century reform movements highlighted women's questions, the intensification of the national movement and the spread of ideas of socialism and democracy required a deeper political and economic participation of women. This crucial task could not be left to the individual reformers.

The early twentieth century saw the rise of many women's organisations which insisted on women's increasing political and economic participation. Three women's organisations were of utmost importance: Women's India Association (WIA), 1917; National Council of Women in India (NCWI), 1925 and All India Women's Conference (AIWC), 1926. Specific core ideas repeatedly surface in the proceedings of women's organisations. One of them was a belief that a society's advancement hinges on women's progress. The deliberations also sought to resist the cultural onslaughts of the West and articulate one's own cultural identity. One of the methods that emerged was the projection of the strength of Indian women through the deification of Hindu/Indian womanhood. Thus, earnest efforts were made to legitimise the changing role of women by invoking traditions from the past.

The early twentieth century in India was also marked by the beginning of women's participation in the national movement. Mahatma Gandhi legitimised and expanded Indian women's public activities by initiating them into the non-violent civil disobedience movement against the Raj. He could draw many women to the political arena by giving an expansive meaning of *swaraj* and helping the women find dignity in public life and a new place in the national mainstream. His views on many issues installed new

confidence among women and a consciousness that they could fight against oppression. As a result, many women joined the non-cooperation and civil disobedience movement during the twenties and thirties. Thus Gandhiji brought India's freedom struggle to the masses, and women were active participants in it. The legacy of women revolutionaries, trade union activists, and nationalists is part of the historical legacy that the independent Indian state inherited.

Women in India did not have to fight for basic rights like women in the West. Women's participation in the freedom struggle makes them aware of their rights in independent India. This led to introduction of the franchise and civic rights of women in the Indian constitution. The post-independent Indian state adopted a patronising role toward women. However, in the late 1960s and early 1970s, the optimism and expectations of the post-independence decade gave way to disappointment over the limited opportunities and discriminatory opportunities provided by the Indian development programmes. Here one can trace the origins of a second wave of feminist consciousness in India.

A hallmark of second wave of feminist consciousness in India is its focus on gender issues. The nineteenth century reform movements aimed at the overall improvement of women through legislation and political action. On the other hand, the early and mid-twentieth century women's movement has been characterised as elitist and upper caste in its composition. It was more interested in the enfranchisement issues and rights to property and inheritance than addressing the more fundamental matters of breaking oppressive patriarchal family structure.

In contrast, second wave feminists in India concentrated on 'identifying the common ties that bind women across class, caste, religious and ethnic lines'. It has also attempted to 'make visible the lives of marginalised, impoverished, rural and urban women, reflecting an awareness of the perils of assuming universal gender interests and ignoring the diversity of women's experiences in specific

social, historical, regional and cultural contexts'. The new movement concedes that state policy has brought about some improvement in the status and power of women. Still, the primary beneficiaries have been middle and upper-class urban women. It also recognises that the constitutional rights given to the women continue to be hindered by patriarchal family structures and the low priority assigned to them by the male-dominated political hierarchy.

'Third World' feminism- The term 'Third World' is widely used in contemporary feminist and postcolonial studies but is fraught with difficulties. The phrase is often seen as a pejorative label, implying 'underdeveloped' or 'undemocratic' when used by Westerners. It is considered more 'correct' nowadays to talk of 'postcolonial feminism'. There is an increasing recognition that Western feminists have struggled against sexism and social and political inequalities, and women in the Third World have had to confront additional problems. They often have to combat sexism through deep-rooted local beliefs and practices concerning class, caste, religion, and ethnic biases. In some countries, their battle with these issues has been combined with and sometimes complicated by a struggle for establishing democratic government and for the most basic freedoms. Although feminism has a long and fascinating history in Third World countries, women in these countries often complain that discussions in the International conferences on veiling and female genital surgery never consulted those women most concerned. Third World women also complain that their agendas were hijacked by European and American women who were only interested in contraception and abortion. When they tackled Third World issues, they sounded both patronizing and racist. There were complaints that endless discussion by Westerners of reproductive rights and sexual orientation meant that the urgent concerns of women from less developed nations were ignored.

Feminism and science- Current feminist challenges to science, following nineteenth-century feminist criticisms,

began by exposing the sexist bias of (male) scientists. For example, at a time when scientists thought the frontal lobe was the centre of thought, men did studies proving women's frontal lobes were slightly smaller than men's. When upper and middle class women were wearing torturous corsets, their tendencies to fainting were cited by men as 'proof' of their frailty. Some feminists question the research methods meant to obtain objectivity, questioning the sort of knowledge that is thereby constructed. Feminists argue that the rise of science as an ideology of male control over female nature results in disregard for and exploitation of the planet and thereby in ecological disasters. Exposing sexual and sexist metaphors scientists use, they argue that sexual politics structures the nature of the scientific empirical method which pretends to be free of cultural and political assumptions. Scientists also inject values into their descriptions of the facts to be investigated. Sexism is intrinsic to scientific discourse. They trace the theft of knowledge/practice from women and the suppression of knowledgeable women, for example the outlawing of midwives during the rise of gynecology. They demand the reclamation of science, both of empirical, common-sense knowledge (knowledge, for example possessed by the *Adivasi* women about herbs) and of sophisticated technologies, for the service and benefit of the people who are not to be the passive consumers of the mysteries of the elite. And they argue that the professionalization of science, together with the ideology of progress, develops knowledge which primarily benefits only certain classes.

While exposing bad science which promotes sexism and sexist agendas, many feminists set about recovering women's contributions to science. Others continue to expose the sexist and racist underpinnings of scientific work. Others develop feminist methodology and epistemology or theory of knowledge. The science upheld as paradigm and most prestigious one is physics. Feminists challenge the assumption that physics is paradigm on the grounds that (1)

the subject matter of physics is not complex; (2) physics provides descriptive formulas which are not explanations, and explanations which are vague metaphors, e.g. 'Big Bang' and 'Black hole'; (3) it excludes intentional, learned and irrational behaviour. Reality is complex; science should explain; and the phenomena of intelligent animals have as much right to a high place on the agenda as sub-atomic particles. Feminist challenges to science, following nineteenth-century feminist criticisms, began by exposing the sexist bias of (male) scientists. For example, at a time when scientists thought the frontal lobe was the centre of thought, men did studies proving women's frontal lobes were slightly smaller than men's. When upper and middle class women were wearing torturous corsets, their tendencies to fainting were cited by men as 'proof' of their frailty. Some feminists question the research methods meant to obtain objectivity, questioning the sort of knowledge that is thereby constructed. Feminists argue that the rise of science as an ideology of male control over female nature results in disregard for and exploitation of the planet and, thereby in, ecological disasters. Exposing sexual and sexist metaphors scientists use, they argue that sexual politics structure the nature of the scientific empirical method, which pretends to be free of cultural and political assumptions. Scientists also inject values into their descriptions of the facts to be investigated. Sexism is intrinsic to scientific discourse. They trace the theft of knowledge/practice from women and the suppression of knowledgeable women, for example, the outlawing of midwives during the rise of gynaecology. They demand the reclamation of science, both empirical, common-sense knowledge (knowledge, for instance, possessed by the *Adivasi* women about herbs) and sophisticated technologies, for the service and benefit of the people who are not to be the passive consumers of the mysteries of the elite. And they argue that the professionalization of science, together with the ideology of progress, develops knowledge which primarily benefits only certain classes.

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Rationality and epistemology- Feminists suggest that there are different concepts of rationality. Masculine rationality is constructed by excluding the attributes and experiences of women. No evidence that appeals to reason, knowledge or truth is uniquely effective. Political action and change involve many capacities besides reason, including capabilities for empathy, anger and disgust. Feminist rethinking of the knower has also suggested that individual knowing is derivative of community knowing. In a sense, the primary knower is a community-what counts as evidence is communal, and construction and acquisition of knowledge are communal processes. Some feminists have questioned the feminist preoccupation with epistemology, which is understood as matters of relations among knowledge, knowers and truth. The interesting relations include knowledge, desire, fantasy, passion and various kinds of power. They claim that when we ignore desire, fantasy, and power, we more easily make epistemology a site of retreat from the conflicts and complexities of interpersonal and political issues. For example, when other women criticize privileged white feminists' own projects of knowledge,

women of colour and/or less privileged, as harmful to them, the response often has been not to attend to the women who are being harmed but to attend to theoretical questions about knowledge and theory.

One reason for a feminist emphasis on epistemology about the project of exploring women's agency has been to rescue women from men's 'knowledge'/construction of women. Feminists are focusing on psychology and note how it constructs the female. For example, mental health for a woman is defined by psychiatrists as her being feminine, heterosexual and sexually accessible to therapists, and the adult standard replicates the male standard. In contrast, the female standard is quite different. Feminists note the types of behaviour for which one is most often hospitalized are disturbingly correlated with race, caste and sex. They note that psychology interprets political phenomena as personal problems, and this diagnosis leads to wrong treatments, often loaded with patriarchal intents.

In the western patriarchal tradition, 'the knower' is unitary; that is, all knowers are, in principle, the same—the rational man. Feminists introduced plurality and complexity, recognizing many knowers with different knowledge, first with the revolutionary addition of women as knowers and the exploration of differences between women and men as knowers and agents. But the concept of the self, male or female, as having unity and stability is also challenged.

Concept of 'selve'- Feminists characterize such selves as wild, radical, creative, aggressive, plural, lesbian, self-critical, and fiery. Many theorists also emphasize the continuous creation and instability of the female selves. Consciousness is never fixed because discourses change, historical and material conditions change, and the relationships with others through which identity is negotiated change; because we are alive. Subjectivity, thus, is not a fixed point of departure or arrival but an ongoing construction. The difficulty of women's self-construction leads some feminists to focus on rehabilitating genuine passions such as anger and

lust, some to focus on respect, and some to focus on the prerequisites of the integrity necessary to resist coercion, manipulation and de-moralization.

Conclusion- In the early 1970s, second-wave feminism (in contrast to the first wave, which focused on gaining the right to vote) exploded in the United States and beyond. Women met in consciousness-raising groups and formed grassroots organizations engaged in a broad spectrum of feminist struggles. In the closing decades of the last century, younger women, some formerly student activists, others emerging from university feminist programmes, have increasingly attracted to the movement and are often, perhaps naturally, critical of their elders. However, each feminist effort gives us yet another aspect of our possibilities. There is truth in all of them. The political discussion and the process of constructing female selves and agency are multivocal today. Many feminists argue that only plural subjects can invent ways to struggle against domination and their plurality impel them towards liberatory action.

Second wave feminism was not limited to the United States and the European countries where its central philosophical tenets emerged. Since the beginning of second wave feminism a half-century ago, the movement has become progressively more inclusive and systemic. It spread to Third World countries and, most notably, India. We should not assume that Indian feminism was a directly borrowed concept from the West. It had its evolutionary process and trajectory, which has enriched the total experience of feminism worldwide. Careful historical analysis may elicit a better understanding of the many achievements and failings of Indian feminism.

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Social Safeguards of Working Women through Protective Laws (An Observation)

• Dr. Omdutt

Introduction - In this 21st Century when the whole world is awakening to the call of enlightened feminism, India still wallows in the swime of primordial misogyny. In many parts of our country, women are still considered to be a burdensome appendage. She is an economic drain. She must be exploited or dispensed with as a non-person because she crushes her family with marriage and dowry expenses. Her birth in many parts of the country is greeted with silence, even sorrow in contrast a boy arrives to the sound of joyous conch shells. Discrimination begins at birth or even before it and continues till she is dead. Comprehensive studies conducted by UNICEF as well as Indian social scientists reveal and organized pattern of discrimination against women. Their revelations are starting.

Who is responsible for this lapse? Is it we the people of India or our religious beliefs? Is it poverty, superstitions or the die-hard traditions? Or is it the patriarchal structure of society or the low social status of women that is to be blamed? Or is it due to the weakness of our laws, or else, is the protection provided by the laws, both general and specific so flimsy that any person can indulge in crimes with impunity and get away? Are the women helpless to fight the atrocities because there are no laws to provide quick relief? Or, are there so many loopholes in these laws that the culprits can manage to remain unscathed?

She (Woman) is defined and differentiated

With reference to man and not he

With reference to her: she is incidental

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The inessential as opposed to the essential. He is the subject, he is the absolute – she is the other.'

All their lived experiences, their Psychologies, their understanding of their physical and mental capabilities and gifts – everything that they know and experiences about themselves – is filtered through their situatedness, and women all over the world, have felt called upon to express their identity with the feminist stand, protesting against this otherness. The ancient history of India, however, depicts a different picture. In legends and myths, for instance, the love regarding the apotheosizing or deification of women is rich, hence denying the idea of woman as an 'object'. Women, during Vedic times, as becomes occupied a valuable place in social and religious spheres of the Vedic rituals, as becomes apparent from the following statement by Manu, required women's presence during religious ceremonies.

Social condition of women - Women have a unique position in every society whether developed, developing or underdeveloped. This is particularly due to the various roles they play during various stages of their life, as a daughter, wife, mother and sister etc., In spite her contribution in the life of every individual human being, she still belongs to a class or group of society which is in a disadvantage position on account of several social barriers and impediments. She has been the victim of tyranny at the hands of men who dominate the society. The position of Indian woman is no better compared to their counterparts in other parts of the world. On one hand she is held in high esteem by one and all, worshipped, considered as the embodiment of tolerance and virtue. But on the other hand she has been the victim of untold miseries, hardships and atrocities caused and perpetuated by the male dominated society. The vulnerability of the women as a class has nothing to do with their economic independence. The woman has been a victim irrespective of her economic background. The rich and the poor alike are the victims of social barriers and disadvantages of varying kinds.

*“Women constitute half the world population. Perform nearly two-thirds of works hours, receive one-tenth of the world's income and own less than one-hundredth per cent of world's property”.*²

*Half of the Indian populations too are women. Women have always been discriminated against and have suffered and are suffering discrimination in silence. Self-sacrifice and self-denial and their nobility and fortitude and yet they have been subjected to all inequities, indignities, inequality and discrimination.*³

In Indian society, women are traditionally discriminated against and excluded from political and family related decisions. Despite the large amount of work women must do on daily basis to support their families, their opinions are rarely acknowledged and their rights are limited. 28 February 2011.

According to a 2005 report from the Indian ministry of health and family welfare, the infant mortality rate among girls is 61 % higher than that of boys. The gender inequality is also present in education, only 2/3 of girls between the ages of 6 and 17 are sent to school, compared to 3/4 of boys of the same age. Also in the countryside, only 46% of women are literate, which is almost one-half the literary rate of men.⁴

Instead of going to school, girls often find themselves forced to work in order to help their families, often from a very young age. Even more worrisome, 25% of women marry before the age of 15 and very often, they marry against their will. This has profound consequences, notably on women's health and their precarious situation often prevents them from receiving proper health care. For many Indian women, poor treatment, violence and exploitation takes place on daily basis.

However in the last decades, the situation of women in India has greatly improved. An increasing number of Indian women are entering local and national politics and since last two years the state of Uttar Pradesh has been under the rule of women Anandi Ben Patel and some other states

also. Indian society does indeed recognize many women's right, including the rights to political involvement, family allowances, government jobs and set up a business. Nevertheless in rural areas, poverty and a lack of information present real barriers to women's independence and empowerment. Programs aimed at advancing human rights, literacy and microfinance are therefore necessary in order to restore Indian women to the place they deserve and open doors to a better future.⁵

Causes and compulsion– Women are as old as civilization and equally ancient are the efforts the combat and arrest them. These efforts have not succeeded and crimes are still maintaining their upward trend. There are records of women being raped, abducted, beaten and subjected to humiliating treatment. Ravan had abducted Sita and taken her to Lanka, the Kauravas had insulted Draupadi in full view of the Raj Darbar. Dushashan had tried to denude her in the presence of all the respectable elders and Yudhister had put her as a pawn in the gamble. Draupadi's supplications for justice to all the elders present in the Darbar fell on deaf years. No one did on perhaps could, raise the voice against the injustice that was being perpetrated.

Where the mind is without fear and the head is held high.

Where knowledge is free

Where the world has not been broken up into fragments by narrow domestic walls.

Where tireless striving stretches its arms towards perfection.

Where the clear stream of reason has not lost its way into dreary desert sand or dead habit.

Where the mind is lead forward by thee into ever widening thought and action.

Into that heaven of freedom, my father, let my country awake.⁶

Women have been subjected to socio-economic and cultural deprivation for such a long time that there is a general indifference and lack of awareness for crimes against them. Crimes like murder, dacoit, robbery etc. are universally

accepted as crimes and are condemned, but crimes against women are justified and condoned even by the women themselves. Women are reared in an atmosphere which slowly but positively helps in the development of a feeling of inferiority, they become used to the institutional legitimation of their low status and find nothing wrong in some of the crimes that are committed against them.

We can indicate the following causes of the inferior condition of women like as the social causes of crimes against women due to social conditioning, patriarchal structure of society, unwholesome family atmosphere, lack of proper training, broken homes, overcrowding in one room, too much interference by the parents, too slack a discipline, lack of love of parents, imprisonment, drunkenness, immorality, cruelty, addiction to drugs, sickness and modern permissive atmosphere etc. At time excessive punishment may also embitter a child and lead him to anti-social activity. Personal and psychological causes are also responsible for crimes against women. Males as well as most of the females still think that the women's most important job is to take care for the husband and the children. Unemployment and poverty is a major cause of women's inferiority.

The legal system is a reflection of the societal attitude towards women. It is non-responsive to her plight. The laws enacted for the protection of women suffer from various shortcomings. The attitude of the courts in interpreting these laws is conservative, rigid and traditional. The enforcement of these laws is so poor that the offenders seem to have lost all fear of authority. They grow bolder because they are not caught so they think that they can indulge in crime with impunity.⁷

The privileged position which is accorded to the offender in our criminal jurisprudence is a major compulsion forcing the woman to suffer in silence. The culprits grow bolder, and indulge in crimes with impunity. Maxims like 'the guilty of the accused should be proved beyond reasonable doubt' and 'innocent unless power guilty' play havoc with the

fate of women and leaves them virtually without any legal remedy. As far as the law of evidence is concerned the same rules of evidence apply to both civil as well as criminal cases. This maxim is not available in codified form but our courts have followed the English common law principle consistently.

Needs of Safeguards – Indian society is male dominated. Man occupies a superior status and the woman is merely his appendage. A woman is never an entry in her own right, she is “first the daughter, next the wife and last the mother of a man”. Men are consciously taught to be aggressive and tough while women are conditioned to be submissive and docile. The constitution and the protective law assert justice and equality to be the goals but the given concepts and shared understanding assign different kinds of resources, opportunities and expectations to the two genders, each of which is sought to be governed by its own distinct code of fairness and justice results in gross injustice to the women and is the cause of their exploitation and their low social status.

However, in India, for long no one thought of politicizing the issue of women's rights for several reasons. Women must have enjoyed relative freedom at home. There was no legal sanction against their education though in practice most of them married young and did not have formal education. But many were intelligent and authoritative and became commander-in-chiefs, so as to say of their clans. There were also matrilineal societies in places like Kerala, where primacy was given to women. They had to right to property. They enjoyed enormous powers and freedom. In general, woman was the fulcrum of the family, the preserver of culture. Man was dependent on woman for his stability. But the dichotomizing of the spheres of activities crystallized into appalling dogmas so much so that Manu declared that 'a woman does not deserve independence, she is an abala'.

Presently Indian women are facing toughest time as far as their routine personal and professional life is concerned. Mental and physical torture of women has become quite

common and their safety is at stake. One of the problems behind this situation is lack of knowledge of legal and constitutional rights of a woman. Most unfortunate part of this is even women are not fully aware about their rights. Through this article I am going to share some women protective laws and constitutional rights of women.

Protective Laws for Women– The principle of gender equality is enriched in the Indian constitution in its preamble, fundamental rights, fundamental duties and directive principles. The constitution not only grants equality to women, but also empowers the state to adopt measures of positive discrimination in favor of women. Within the framework of a democratic polity, our laws, development policies, plans and programs have aimed at women's advancement in different spheres. India has also ratified various international conventions and human rights instruments committing to secure equal rights of women. Key among them is the ratification of the convention elimination of all forms of discrimination against women (CEDAW) IN 1993. The constitution of India not only grants equality to women but also empowers the state to adopt measures of positive discrimination in favor of women for neutralizing the cumulative socio economic, education and political disadvantages faced by them. Fundamental rights, among others, ensure equality before the law and equal protection of law; prohibits discrimination against any citizen on grounds of religion, race, caste, sex or place of birth, and guarantee equality of opportunity to all citizens in matters relating to employment. Article 14, 15, 15(3), 16, 39(a), 39(b), 39(c) and 42 of the constitution are of specific importance in this regard. Some more protective laws for women are as follows -:

1. Commission of Sati (Prevention) Act, 1987.
2. Commission of Sati (Prevention) Act, 1988.
3. Dowry Prohibition Act, 1961.
4. Dowry Prohibition (Maintenance of Lists of Presents to the Bride and Bridegroom) Rules, 1985

5. Immortal Traffic (Prevention) Act, 1956.
6. Indecent Representation of Women (Prohibition) Act, 1986.
7. Medical Termination of Pregnancy Act, 1971.
8. National Commission for Women Act, 1990.
9. National Human Rights Commission (Procedure) Regulations, 1994.
10. Pre-natal Diagnostic Techniques (Regulation and Prevention of misuse) Act, 1994.
11. Protection of Human Rights Act, 1993.⁹

Conclusion– A critical survey of various crimes committed against women reveals that neither education nor the laws have changed the basic notions regarding a women's worth. Our protective laws fall like the proverbial pack of cards in face of social realities.

Who is responsible for this laps? Is it we the people of India or our religious beliefs? Is it poverty, superstitions of the die-hard traditions? Or is it the patriarchal structure of society or the low social status of women that is to be blamed? Or is it due to the weakness of our laws, or else, is the protection provided by the laws, both general and specific so flimsy that any person can indulge in crimes with impunity and get away? Are the women helpless to fight the atrocities because there are no laws to provide quick relief? Or, are there so many loopholes in these laws that the culprits can manage to remain unscathed?

In finally women are pivotal for development of any society any everywhere in the world women discharge towards at home as housewives and outsiders wage earners both are important for development of good society and nation as a whole. It is the women, who acts as vital agents for socio economics activities like bearing and rearing children providing much of the labor for house hold maintain and subsistence agriculture and soon women make an important contribution to the economy through waking in both the formal and informal section.

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Single Parent Mother & their quality of life

- Akanksha Chaurasia
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Parenting is not a easy task, and it becomes more complex and panic when the status of parent is single and especially one Single parent mother. Always parents genuinely care about their children and are willing to make sacrifices in terms of time, energy, and money to ensure their well-being and overall development. When a condition is of single parenting status, it becomes even more severe. A single parent's life is filled with high expectations and numerous challenges. Single parents are more likely than dual parents to have higher levels of chronic stress and mental health problems in comparison to double parents. A single parent has double the responsibilities, which necessitate the parent's time, attention, and financial resources. Single-parent family means a family consisting of a single mother or father and their dependent children.

Single parenting refers to a situation in which one of the two individuals involved in the child's conception (i.e., the mother or father) is solely responsible for the child's upbringing. Single parents must balance child care and other caregiving responsibilities with personal work and leisure schedules in the absence of a spouse or cohabiting partner, a task that requires physical, emotional, and financial capital. Single-parent families have become the fastest-growing family type, and the added responsibility hurts the single

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parent's mental health and psychological well-being.

In India, or even around the world, the single-parent family is not a new phenomenon. Perhaps what's new is that social scientists are paying more attention to it. This increased emphasis on single-parent families is not without justification. Large-scale changes in the social and economic spheres have resulted in the rise of family lifestyles that differ from the traditional pattern of two-parent families in both the industrialized West and Third World countries over the last few decades. The majority of these families are headed by women, have children who are dependent on them, and are poor (Buvinic, Yousef, and Von Elm, 1978). Some of the reasons for the formation of such families include death, divorce, separation, desertion, male migration for employment, and unwed motherhood. According to estimates, between 25 and 33 percent of all households in the world are de facto headed by women, who are financially responsible for their own and their children's survival due to marital dissolution, desertion, absence of a spouse, or male marginality.

Single Parent Mothers- If the single parent is a mother, she may have to choose between continuing to be a mother and also working outside the home. Children frequently increase their demands after the death of their father, which occurs at a time when the mother is also attempting to reroute her own life. For financial reasons and a psychological boost to her already weakened self-esteem, the mother frequently works outside the home. Single women are found to have a lot of problems in common all over the country. For them, financial and emotional setbacks are unavoidable. Single Indian women are particularly vulnerable to superstitious and backward social attitudes. At this time, we can see that the life of a single mother has undergone numerous changes.

Single Parent Fathers- A single parent father faces numerous challenges, particularly when it comes to child-rearing. They must alter their roles within the family. Today, they are more likely to be found assisting children in the classroom, doing

housework, assisting in the kitchen, and other previously considered "mother" roles. Fathers were simply not socialized to be primary caregivers before this, even though many men did raise children on their own due to the high rate of maternal death. Fathers often do not communicate with their children as well as mothers do; this goes against the popular belief that fathers are stricter than mothers; however, they are less disciplinary than single mothers. However, fathers can have a significant impact on their children because the best way for a son to learn how to be a good father is to observe his own. However, because of their stress and problems, most single-parent fathers are unable to be role models.

Status of single parents in India- In India, single parents refer to a father or mother who is living alone with their children due to death, divorce, or separation from their partner. In most cases of divorce/separation, the children are given to the mother. Divorce is the most harrowing experience a person can have as an adult. It can also be very distressing for children. In India, most single-parent families have a difficult time. Despite the difficulties of adjustment, many people choose to divorce or separate rather than stay in an unhappy relationship. A single parent does not have to be the child's biological mother or father; some people choose to become single parents by adopting their children. Because of illness, the death of one or both parents, the inability of the extended family to care for the child, parental abandonment, extramarital affairs, and other factors, the biological parents are unable to care for the child. If a mother is still alive, she usually keeps custody of her child or children.

According to a UN report, single mothers control 4.5 percent of all Indian households, highlighting the country's large number of single-parent families. Even though the majority of Indian households are still made up of couples with children of all ages, extended families, and lone mother households, the UN Women report estimates that there are 13 million lone mother households in India.

Another 32 million people are thought to be living in extended families. In India, 46.7 percent of families are couples living with their children, over 31% are extended families, and 12.5 percent are single-person families. Over eight out of ten lone-parent households in the world are headed by women (84.3 percent). This translates to 101.3 million households with lone mothers and their children based on data from 89 countries. Many other single mothers share extended households with their children.

The household composition data for India comes from the employment survey conducted in 2009-2010. The estimates were derived using this data on household size and composition, as well as the World Population Prospect (2017). As a result, the final figures in millions are based on India's population estimates from 2017. According to the report, the poverty rates of lone mothers' households are much higher than those of dual-parent households with children aged 6 and under.

Quality of Life- Is the degree to which a person is healthy, comfortable, and able to participate in or enjoy life events, according to Britannica. The World Health Organization (WHO) defines QOL as "an individual's view of their place in life about their objectives, aspirations, standards, and concerns in the context of the culture and value systems in which they live." Wealth, employment, the environment, physical and mental health, education, recreation and leisure time, social connection, religious beliefs, safety, security, and freedom are all standard markers of quality of life. QOL can be found in a variety of settings, including international development, healthcare, politics, and employment. Various studies have found that single-parent female households experience financial stress, which lowers their quality of life. Hyun-Sim Lee, Kyu-Chul Han, and Gi-Bog Jeon found that financial satisfaction and physical health status had a big impact on the psychologically distressed (2013). Single mothers, according to Ga Eun Kim and Eul-Jung Kim (2020), had a lower Quality of Life than married mothers (QOL).

Single mothers' quality of life was significantly lower than the general population, according to Cook et al., (2009). Women in single-parent families have a lower quality of life, a lower income, and are more depressed than women in two-parent families, according to Hernandez, Aranda, and Ramirez (2009).

Due to differences in other factors between nuclear and single-parent households, depression is shown to be the most prevalent variable in the total sample and each type of family, as well as the most effective. This shows how the living conditions of nuclear and single-parent households differ and have different effects on quality of life. According to Pollmann and Schult (2018), generous family benefits, extensive childcare, and high levels of gender equality are associated with lower life satisfaction penalties for single mothers, whereas the cultural climate surrounding single motherhood has no impact on single mothers' life satisfaction. The disparity between single mothers and childless singles is much smaller than the disparity between single mothers and partnered mothers. Furthermore, childless singles in countries with supportive family policies and high levels of gender equality are just as happy as childless singles elsewhere. The psychological, physical, social, and cultural aspects of quality of life are equal in all three groups, according to Dorit Segal-Engelchin and Yochanan Wozner (2005). Single mothers by choice had a significantly higher quality of life in all four components than married mothers after controlling for economic and paternal involvement factors. There were no significant differences between divorced mothers and single mothers who chose to be single.

The majority of single mothers' main source of stress, according to Nidhi Kotwal & Bharti Prabhakar (2009), was financial. Their situation had an emotional impact on the single mother's life. Loneliness, helplessness, hopelessness, a lack of identity, and lack of confidence were all expressed by the majority of single mothers. As a result of their depression, the majority of single mothers avoided social gatherings and

changed their clothing styles. As a result of their depression, they developed poor food and eating habits. The majority of single mothers found it difficult to maintain discipline among their children due to the absence of male family members.

Loneliness, trauma, and depression were expressed by the mothers, as well as difficulty managing childcare and establishing a routine for their children. According to a review of the literature, single motherhood of any kind has a significant impact on various aspects of mothers' lives. One of the most visible consequences of single motherhood is the negative image that single mothers and their families have (Erera, 2002). SMC, like other single mothers, must deal with social stigmas, as the traditional two-parent family remains the ideal family model in today's society (Erera, 2002). In India, single motherhood is also portrayed in a negative light. Single mothers were said to be juggling the dual responsibilities of earning a living and caring for their children (Bhave, 1983 and Singh & Gill, 1986). These mothers had a difficult time raising their children on their own, and the stress caused by financial problems, combined with the strain of overload, frequently resulted in child neglect (Desai et. al., 1986 and Leela, 1991). These mothers were tasked with a plethora of tasks, including earning, raising their children alone, managing the household, and paying for their children's education (Leela, 1991 and Shanti, 1994). Because most women were not well educated or trained for any job, their economic status plummeted. Suicide attempts, hysteria, insomnia, feelings of unworthiness, aggression, and restlessness were all reported as side effects of the breakup. Due to the suppression of sexual desires, there was a significant amount of guilt.

Domain Wise Quality of Life

Social- High levels of worry and insufficient financial resources, according to Coyne, (2003) contribute to a reduced perception of quality of life in single sole supporting mothers. He also recognizes social support as a positive factor that can improve an individual's quality of life perception. In

comparison to married mothers, single mothers reported lower levels of perceived social support, social involvement, and frequency of contact with friends and family. Nearly 40% of the relationship between single-parent status and depression is due to stress and social support. Single motherhood, according to Rousou et al., (2013), places women in a negative social position that is associated with prolonged stress, primarily due to unemployment, economic hardship, and social exclusion, all of which have negative health consequences.

Physical- Shin, Hee- Jung (2013) stated that because of their responsibility for not only parenting but also the survival of their families, single mothers could not have cared for their health. However, the participants believed that they had a good fortune and their social networks. Furthermore, as they recovered from ambiguous health anxiety and gained self-confidence, their life attitude changed to active, and their family relationship improved. Fritzell et al. (2012) and Burstrom et al. (2010) do the review in this regard and found that single mothers reported significantly worse health and thus should be considered a disadvantaged group in terms of their health. The fact that the gap was smaller in Italy, where single mothers were more likely to work, strongly suggests that unemployment and economic hardship are the primary causes of inequality.

Psychological- Single mothers were more likely than married mothers to have experienced a depressive episode, to report higher levels of chronic stress, more recent life events, and a greater number of childhood adversities (Cairney et al., 2003). They also discovered a family structure-dependent effect of stress on depression. Life events were linked to depression more strongly in married mothers than in single mothers. Wang, J. L. (2004) stated that the difference in the prevalence of major depression between single and married mothers is age-related. When compared to married mothers, single mothers who had one or more jobs and were non-white had a higher risk of developing major depressive syndrome. These

findings pose a challenge for health professionals, particularly those in the community sector, as well as policymakers, to develop supportive measures for this vulnerable group based on socioeconomic factors. Separated/divorced mothers had higher rates of anxious-misery disorder, depression, dysthymia, generalized anxiety disorder (GAD), post-traumatic stress disorder, any externalizing disorder, and antisocial personality disorder when compared to married mothers. There were differences between never-married and separated/divorced mothers, with separated/divorced mothers having higher odds ratios for anxiety, depression, and GAD. Single parents, particularly single mothers, are a socially and economically vulnerable group that is at risk for various physical and mental health problems. For instance, single mothers have poor physical and mental health status relative to parents living as couples (Rousou et al,2013; Van de Velde et al,2014). The survey also reported that vulnerable single parents with low education and income levels were more likely to experience depressive symptoms and report worse subjective health conditions (Ministry of Gender Equality and Family,2015). A recent review suggests that single mothers have lower health status levels than married mothers and that financial strain and lack of social support were associated with the differences in health status (Rousou et al,2013). Another study found that unemployment, poverty, and lower education were associated with poor health in single mothers (Van de Velde et al,2014). Single mothers reported lower life satisfaction and lower health status than married mothers (Meier et al,2016). Conversely, one study reported that single mothers' life satisfaction was higher in countries with supportive family policies and higher levels of gender equality (Pollmann-Schult,2018). single mothers report being less satisfied with their lives than partnered mothers. This life satisfaction penalty for single mothers is commonly attributed to the higher levels of emotional and financial stress and strain that accompany long-term single parenting.

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Hidden Disease of Women Society

● **Shikha Tiwari**

There is a very pathetic situation in our society regarding women, even today there is no open discussion about his illness this is a matter of concern for our society, the first priority should be given to your health It's understandable that, as the primary caretakers in the home, you can easily put your own health on the back burner, but today, make the choice to make a change and give your health the number-one priority in your life that it **DESERVES**. This month, celebrate your strength by collaborating with your local Spirit of Women Hospital as they embrace the Centers for Disease Control and Prevention's Women's Health Week, (May 8-14, 2011) where women are empowered to put their health first and foremost! Did you know that, according to the Centers for Disease Control and Prevention, 35% of women over the age of 20 are obese, 33% of women over the age of 20 have hypertension, and 1,219,744 women are dying every year? Many times, women **UNKNOWINGLY** put their health at risk by ignoring certain telltale symptoms. CNN reports that there are seven common “hidden” diseases secretly attacking women's health.

These “hidden” diseases include: 1 **POLYCYSTIC OVARY SYNDROME**: the most common hormonal disorder among women of reproductive age. As many as one in every 10 women of childbearing age will develop it, which is the leading cause of infertility. 2 **FIBROMYALAGIA**: acquired in early to mid-adulthood, it's also known as Central Sensitivity Syndrome and affects three to six million women in the U.S. alone. 3 **CHRONIC FATIGUE SYNDROME**: forces mental and physical inactivity and does not improve with rest. Women, especially in their 40s and 50s, are four

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times more likely to develop this condition than men. 4 LUPUS: there are four types, but the most common is “systemic lupus erythematosus” and is a malfunction of the immune system where the body becomes its own worst enemy. Women make up 90% of its victims. 5 MULTIPLE SCLEROSIS (MS): causes your immune system to attack the protective covering of the nerves in the brain and lets your nervous system break down the communication between the brain and the body. It may even destroy the nerves entirely. Women are three times more likely than men to develop MS and it generally appears between the ages of 20 and 40. 6 RHEUMATOID ARTHRITIS (RA): attacks the linings of the joints through the immune system. Women make up three-quarters of RA cases and usually peak between the ages of 40 to 60. 7 IRRITABLE BOWEL SYNDROME: chronic abdominal cramping and pain, bloating, gas, diarrhea and constipation that may be caused by a malfunction in the way the brain interacts with the gut. 20% of Americans suffer from IBS, but it is two times more likely in women.

This Women's Health Week, let's take the time to rejoice in life by tending to our health! Simple lifestyle changes such as being aware of the signs your body is giving you and partnering with local Spirit of Women physicians to maintain your good health make all the difference. Taking small steps at home like making slight changes to your diet or increasing your physical activity will guarantee that you'll feel great and have the Freedom to achieve anything you decide to do!

We Are Going to Talk About Some Such Disease of Women: Women and Infectious Diseases-Social, economic, environmental, and demographic changes during the 20th century have affected the health of women. Many of the changes have benefited women's health, but some have had deleterious effects. Infectious diseases pose an especially formidable threat to women, claiming >15 million lives around the globe each year . For many infectious diseases, women are at higher risk and have more severe course of

illness than men for many reasons, including biologic differences, social inequities, and restrictive cultural norms. These are often the same factors responsible for the disproportionate disease incidence among vulnerable populations throughout the world. Efforts to recognize and reduce health disparities among women have particular relevance for global health.

HIV and AIDS in Women- In addition to hunger, lack of education, and environmental and socio-cultural constraints, HIV/AIDS and malaria, along with tuberculosis, continue to disproportionately affect and further weaken the condition of women in many of the world's poorest regions. Recent estimates indicate that more than half of the estimated 38 million cases of adult HIV infection worldwide are in women. Moreover, the social, economic, and psychologic effects of the disease are more severe for women. When their partners or fathers die, women often lose economic rights. A Ugandan survey found that one in four widows reported losing their property after their partner died. In sub-Saharan Africa, the region most affected by HIV, women are 30% more likely than men to be HIV-infected. The largest gender difference occurs among younger age groups. New HIV infections among women are also on the rise in the United States. An analysis of newly diagnosed HIV infections that occurred in 29 states between 1999 and 2002 showed that more than one third of cases resulted from heterosexual contact; among these heterosexually transmitted infections, almost two thirds (64%) occurred in women. Similarly, a recent analysis of New York City's HIV reporting data found that 35% of new HIV diagnoses in 2001 were in women, compared with 28% before 2001. HIV infection in women has obvious implications for the health and well being of children. HIV infection can be transmitted perinatally, and increasing numbers of children—estimated at ≈ 12 million—are orphaned by the disease. Although preventing HIV transmission from an infected mother to her infant has become feasible due to effective antiretroviral treatment regimens and has met with

great success in many parts of the world, services that prevent mother-to-child transmission are severely limited in low-income countries. Similarly, although combination antiretroviral therapy offers the potential to manage the disease as a chronic, treatable condition, access to such treatment is primarily limited to persons in high-income countries, which excludes the most severely affected regions. As an example, ≈ 4.1 million persons in Africa are in need of such therapy, but $< 2\%$ have access to the drugs. Preventing new infections is fundamental to stopping the spread of HIV. Attaining this goal requires that all persons have information about the disease and know their infection status, a formidable challenge in both low- and high-income countries. Such information can help uninfected persons remain free of the disease and help those who are infected gain access to treatment and prevent transmission to their partners. Fortunately, several broad-based national and international initiatives have been taken towards meeting these challenges. For example, the President's Emergency Plan for AIDS Relief is a 5-year, \$15 billion commitment to treat HIV infection and prevent new infections in Africa and the Caribbean. Other undertakings include the United Nations' Global Fund to Fight AIDS, Tuberculosis, and Malaria and "The 3 by 5 Initiative," a detailed, multicountry plan developed by the World Health Organization and the Joint United Nations Programme on HIV/AIDS to provide antiretroviral treatment to 3 million HIV-infected persons in developing countries by the end of 2005.

Malaria in Women- Malaria is another infectious disease threat that disproportionately affects women; it causes serious illness in pregnant women and children < 5 years of age. Every year, malaria kills 1.5 million to 2.7 million persons and adversely affects another 300,000 to 500,000, mostly in Africa. Pregnant women suffer decreased immunity to malaria, which more than doubles their chances of contracting and dying of the disease. Pregnant women who contract malaria have an increased risk for severe maternal

anemia. The consequent impaired fetal growth contributes to low birth weight in newborns. Malaria during pregnancy causes as many as 10,000 maternal deaths each year, 8%–14% of all low birthweight babies, and 3%–8% of all infant deaths in certain parts of Africa.

Other Infectious Diseases in Women- In addition to HIV, women are more susceptible to other sexually transmitted diseases (STDs) and their long-term complications. In the United States >50% of preventable infertility is related to STDs . In addition, most sexually transmitted pathogens can be passed to the fetus or infant, sometimes with fatal consequences.

Longitudinal studies show that women are also at greater risk for active disease from Mycobacterium tuberculosis infection. Case-fatality rates are likewise higher in women. Reasons include decreased immune function due to poor nutritional status and delays in seeking care, both of which can be a function of gender.

The tropical parasitic disease schistosomiasis presents special concerns for women. Among parasitic diseases, schistosomiasis is second to malaria in prevalence; it affects >200 million persons in 74 countries. In affected areas, women are at greater risk for the disease compared to men because of their increased exposure to contaminated water through domestic work such as washing clothes and preparing food. Consequences of the disease are more severe in women than in men. Female genital schistosomiasis, often misdiagnosed as an STD, can cause tumors, ulcers, and infertility and may actually increase the risk for STDs .

Infectious Diseases in Pregnant Women- Pregnancy complicates the impact of many other infectious diseases. Each year in the United States, ≈20,000 infants are born to women infected with hepatitis B virus (HBV) . Without postexposure prophylaxis, ≈6,000 of these infants would become chronically infected with HBV, and ≈1,500 would die prematurely of chronic liver disease. To address this problem, perinatal HBV prevention programs screen

pregnant women for HBV and follow up with vaccination of newborns. Hepatitis C virus can also be transmitted during pregnancy, although the rate of infection appears lower than that of HBV. Hepatitis E virus can also have severe consequences if acquired during pregnancy, especially during the third trimester. It has been associated with increased risk for spontaneous abortions and still births as well as fulminant hepatitis in both mothers and infants.

Another serious maternal infection is group B streptococcus (GBS). GBS can be transmitted from mother to baby during pregnancy or during labor and delivery. During the 1990s, prevention efforts involving intrapartum antibiotic prophylaxis dramatically lowered the incidence of disease. However, GBS remains a leading infectious cause of illness and death among newborns in the United States.

Reducing Health Disparities in Women- Women are caretakers and brokers of health for their families. These roles can increase their risk for infectious diseases and increase obstacles to adequate and timely treatment. Seeking health care can be the first step to identifying and treating a host of illnesses affecting women and their families. Therefore, innovative ways to reach at-risk women, including developing new research agendas to identify and address gender differences in infectious disease, are especially needed.

Reducing health disparities for women requires a multidisciplinary global effort to combat the root causes of these disparities—social, economic, and educational inequities that fuel the spread of diseases and perpetuate poverty throughout the world. Although much remains to be done, commitment to reduce these disparities on behalf of the international community is increasing. In addition, participants at the International Conference on Women and Infectious Diseases also play an important role in these efforts through their broad range of expertise and commitment to improving global health.

More common disease in females- Here are some of the

most prevalent health concerns impacting women, and what you can do to manage your risk.

- Heart disease
- Stroke
- Diabetes
- Maternal health issues
- Urinary tract infections
- Sexual health
- Breast cancer
- Osteoporosis
- Disorders that only affect females
- Turner syndrome
- Reft syndrome

Turner Syndrome

Overview- Turner syndrome, a condition that affects only females, results when one of the X chromosomes (sex chromosomes) is missing or partially missing. Turner syndrome can cause a variety of medical and developmental problems, including short height, failure of the ovaries to develop and heart defects.

Turner syndrome may be diagnosed before birth (prenatally), during infancy or in early childhood. Occasionally, in females with mild signs and symptoms of Turner syndrome, the diagnosis is delayed until the teen or young adult years.

Girls and women with Turner syndrome need ongoing medical care from a variety of specialists. Regular checkups and appropriate care can help most girls and women lead healthy, independent lives.

Symptoms- Signs and symptoms of Turner syndrome may vary among girls and women with the disorder. For some girls, the presence of Turner syndrome may not be readily apparent, but in other girls, several physical features are apparent early. Signs and symptoms can be subtle, developing slowly over time, or significant, such as heart defects.

Before birth- Turner syndrome may be suspected prenatally based on prenatal cell-free DNA screening- a method to screen for certain chromosomal abnormalities in a developing baby using a blood sample from the mother- or prenatal ultrasound. Prenatal ultrasound of a baby with Turner syndrome may show-

Large fluid collection on the back of the neck or other abnormal fluid collections (edema)

- Heart abnormalities
- Abnormal kidneys
- At birth or during infancy

Signs of Turner syndrome at birth or during infancy may include-

- Wide or web like neck
- Low-set ears
- Broad chest with widely spaced nipples
- High, narrow roof of the mouth (palate)
- Arms that turn outward at the elbows
- Fingernails and toenails that are narrow and turned upward
- Swelling of the hands and feet, especially at birth
- Slightly smaller than average height at birth
- Slowed growth
- Cardiac defects
- Low hairline at the back of the head
- Receding or small lower jaw
- Short fingers and toes
- In childhood, teens and adulthood

The most common signs in almost all girls, teenagers and young women with Turner syndrome are short stature and ovarian insufficiency due to ovarian failure. Failure of the ovaries to develop may occur at birth or gradually during childhood, the teen years or young adulthood. Signs and symptoms of these include -

- Slowed growth
- No growth spurts at expected times in childhood

- Adult height significantly less than might be expected for a female member of the family
- Failure to begin sexual changes expected during puberty
- Sexual development that "stalls" during teenage years
- Early end to menstrual cycles not due to pregnancy
- For most females with Turner syndrome, inability to conceive a child without fertility treatment.

Reft Syndrome-

Overview- Rett syndrome is a rare genetic neurological and developmental disorder that affects the way the brain develops. This disorder causes a progressive loss of motor skills and language. Rett syndrome primarily affects females.

Most babies with Rett syndrome seem to develop as expected for the first six months of life. These babies then lose skills they previously had-such as the ability to crawl, walk, communicate or use their hands.

Over time, children with Rett syndrome have increasing problems with the use of muscles that control movement, coordination and communication. Rett syndrome can also cause seizures and intellectual disabilities. Unusual hand movements, such as repetitive rubbing or clapping, replace purposeful hand use.

Although there's no cure for Rett syndrome, potential treatments are being studied. Current treatment focuses on improving movement and communication, treating seizures, and providing care and support for children and adults with Rett syndrome and their families.

Symptoms-

- Babies with Rett syndrome usually are born after an uncomplicated pregnancy and delivery. Most infants with Rett syndrome seem to grow and behave as expected for the first six months. After that, signs and symptoms start to appear.
- The most pronounced changes generally occur at 12 to 18 months of age, over a period of weeks or months.

Symptoms and their severity vary greatly from child to child.

The main signs and symptoms include-

Slowed growth- Brain growth slows after birth. Smaller than usual head size (microcephaly) is sometimes the first sign that a child has Rett syndrome. As children get older, there is delayed growth in other parts of the body.

Loss of movement and coordination abilities. The first signs often include reduced hand control and a decreasing ability to crawl or walk. At first, this loss of abilities occurs rapidly, and then it continues more gradually. Eventually muscles become weak or stiff, with unusual movement and positioning.

Loss of communication abilities. Children with Rett syndrome typically begin to lose the ability to speak, to make eye contact and to communicate in other ways. They may become disinterested in other people, toys and their surroundings. Some children have rapid changes, such as a sudden loss of language. Over time, children may gradually regain eye contact and develop nonverbal communication skills. Unusual hand movements. Children with Rett syndrome usually develop repetitive, purposeless hand movements, which differ from child to child. Hand movements may include hand-wringing, squeezing, clapping, tapping or rubbing.

Other signs and symptoms can include:

Unusual eye movements. Children with Rett syndrome tend to have unusual eye movements, such as intense staring, blinking, crossed eyes or closing one eye at a time.

Breathing problems. These include breath holding, rapid breathing (hyperventilation), forcefully blowing out air or saliva, and swallowing air. These problems tend to occur during waking hours. Other breathing disturbances such as shallow breathing or short periods of stopping breathing (apnea) can occur during sleep.

Irritability and crying. Children with Rett syndrome

may become increasingly agitated and irritable as they get older. Periods of crying or screaming may begin suddenly, for no apparent reason, and last for hours. Some children may experience fears and anxiety.

Other unusual behaviors. These may include, for example, sudden, odd facial expressions and long bouts of laughter, hand licking, and grasping of hair or clothing.

Intellectual disabilities. Loss of skills may be connected to losing the ability to think, understand and learn.

Seizures. Most people who have Rett syndrome experience seizures at some time during their lives. Multiple seizure types may occur and are associated with changes on an electroencephalogram (EEG).

Sideways curvature of the spine (scoliosis). Scoliosis is common with Rett syndrome. It typically begins between 8 and 11 years of age and progresses with age. Surgery may be required if the curvature is severe.

Irregular heartbeat. This is a life-threatening problem for many children and adults with Rett syndrome and can result in sudden death.

Sleep disturbances. Problems with sleep patterns can include irregular sleep times, falling asleep during the day and being awake at night, or waking in the night with crying or screaming.

Other symptoms. A variety of other symptoms can occur, such as a decreased response to pain; small hands and feet that are usually cold; problems with chewing and swallowing; problems with bowel function; and teeth grinding.

Stages of Rett syndrome- Rett syndrome is commonly divided into four stages:

Stage 1- Early onset. Signs and symptoms are subtle and easily overlooked during the first stage, which starts between 6 and 18 months of age. Stage 1 can last for a few months or a year. Babies in this stage may show less eye contact and start to lose interest in toys. They may also have delays in sitting or crawling.

Stage 2- Rapid deterioration. Starting between 1 and 4 years

of age, children lose the ability to perform skills they previously had. This loss can be rapid or more gradual, occurring over weeks or months. Symptoms of Rett syndrome occur, such as slowed head growth, abnormal hand movements, hyperventilating, screaming or crying for no apparent reason, problems with movement and coordination, and a loss of social interaction and communication.

Stage 3- Plateau. The third stage usually begins between the ages of 2 and 10 years, and it can last for many years. Although problems with movement continue, behavior may slightly improve, with less crying and irritability, and there may be some improvement in hand use and communication. Seizures may begin in this stage and generally don't occur before the age of 2.

Stage 4- Late motor deterioration. This stage usually begins after the age of 10 and can last for years or decades. It's marked by reduced mobility, muscle weakness, joint contractures and scoliosis. Understanding, communication and hand skills generally remain stable or improve slightly, and seizures may occur less often. When to see a doctor. Signs and symptoms of Rett syndrome can be subtle in the early stages. See your child's health care provider right away if you begin to notice physical problems or changes in behavior after what appears to be typical development. Problems or changes may include-

- Slowed growth of your child's head or other parts of the body
- Decreased coordination or mobility
- Repetitive hand movements
- Decreasing eye contact or loss of interest in usual play
- Delayed language development or loss of previous language abilities
- Any clear loss of previously gained milestones or skills

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Role of Indian Women and Government to Protect Rights Since Independence: A Discussion

• **Maitri Pandit**

Introduction- The issue of women's rights and their development has always been a very important concern of the Indian government and women's activists since independence. Women's rights are violated in various ways and at the same time the Indian government and various women's organizations continue their efforts to protect their rights and ensure their development. Undoubtedly, women in the 21st century, unlike men, are able to establish their own dignity and capacity in education, financial self-sufficiency, government employment, various important local, national and international political activities, medicine and research, and sports. Despite their significant contributions and achievements in various spheres of socioeconomic and political life, women in the Indian patriarchal social system are widely victims of gender inequality, gender discrimination and various forms of violence. As a result, several rights of women, especially rights of the backward caste women, are drastically violated through various unjust practices and discriminatory attitudes towards them. In addition, these practices result in

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domestic violence against them and hinder their overall development. Women's rights to equal access to education, the ability to choose a life partner, financial rights, and freedom of movement are just a few of the major rights that are frequently denied to them as a result of socio-cultural gender-based discrimination. Dowry conflicts, other discriminatory practices at home and beyond the house, trafficking of women and girls, female foeticide, rape and sexual harassment have all been threats to Indian women's human rights. Since independence, the Indian government, in collaboration with women's activists and groups, has taken extraordinary steps to defend women's socioeconomic and political rights.

Discussion- Since India's independence, women have fought for their socioeconomic and political rights. Her active and spontaneous participation in the Gandhiji-led Indian independence movement is a significant chapter in the history of India's struggle for freedom. However, as much as women were active in politics before independence, the movement was somewhat weakened after independence as the Indian government's response to women's various demands was met. The Constitution of free India ensured universal adult franchise both for men and women, and the right to equality before the law and prohibits discrimination as a fundamental right in Article 14 and 15 of the Indian Constitution. The vicious practice of untouchability has been prohibited by the government of India

through article 17, and this article falls within the fundamental rights of Indian citizens (Basu, 2008, pp.87, 93, 98-99). Then, in articles 39 ensures equal access to means of livelihood for all men and women citizens and article 42 ensures just and humane working conditions and maternity relief (Constitution of India, 1950, <https://www.constitutionofindia.net>). A decade after independence, essentially from the mid-1950's, the Indian government passed several laws aimed at securing women's socio-economic rights. The most important of these is the Hindu Marriage Act of 1955, which guarantees women's rights in marriage and divorce equally with men, and affirms monogamy. In fact, this law grants equal rights in marriage. Then the Hindu Succession Act of 1956, which emphasizes the codification of succession of men's and women's property and speaks of the origin of women's property, it means a woman's property which she is gained from her father and if she is not-surviving husband or children, then it passes to her from her father's successor, and if she receives property from her father-in-law, then it is succeeded by her husband's inheritance. However, this rule makes no provision for property obtained by the woman herself (Chatterji, 2009, pp.413-414). And the Indian government also passed the Dowry Prohibition Act in 1961 to ban dowry in marriage. Since independence, and through the activities of various women's organizations, women have engaged in politics to solve various socio-economic problems.

Since the 1950's, leaders of communist women's groups have begun to criticize government activities and express dissatisfaction with constitutional provisions and five-year plans. The National Federation of India Women (NFIW) was established in 1954 through the dedicated efforts of Vibhla Farooqui and other CPI women followers. This organization focused on women's vital issues such as achieving equality in enjoying rights and bearing responsibilities in all aspects of life, improving living conditions, etc. (Forbes, 2004, p.225). Women from all over India also joined the Naxalite movement. Farmers and tribal women in the Naxalbari and other areas were directly involved in land struggles, while urban young women, primarily students, were ideologically attached to the movement (Munshi, 2005, p.82). Apart from the communist and Naxalite trends in the women's movement, there was a Gandhian trend that had its origins in the close female followers of Gandhi. Among them, Krishnabai Nimbkar is the most famous. They favored social and economic change rather than legislative and constitutional change. They preferred grass-roots projects (Forbes, 2004, pp.226). Since the 1950s, women have organized themselves again to fight against widespread hunger (Munshi, 2005, p. 81.). Indian women fought for the rights of the poor people in villages and manufacturing employees at the time. Women were active participants in the Tebhaga movement in Bengal, the Telangana movement in Andhra

Pradesh, the Naxalite movement, and the Shahada movement in Maharashtra's Dhulia area, and their participation had a significant impact on Indian women's movement history. The women's movement emerged over time in India as a result of several current hot topics such as physical abuse against wives by their husbands, such as wife beating, family violence, alcoholism, price increases, and so on. The Chipko movement, which took place between 1973 and 1974, was a well-known example of women's resistance and empowerment. The Chipko movement began in 1973 in the small hilly town of Gopeshwar, Chamili district, when representatives or contractors from a sports factory came to cut down trees and then women stood together to protect trees (Basu, retrieved March 5, 2022, p.07-08). The Indian government has implemented several laws and policies to protect the environment. Among these laws and policies, the most significant are the Forest Conservation Act 1980, the Environment Protection Act 1986, the National Forest Policy 1988, the Biological Diversity Act 2002 and the National Green Tribunal Act of 2010 (*Environmental Law–Principles and Policies in India | ENVIS Hub Haryana | India*, 2020). Also for safeguarding reproductive health of Women and Children's Health The Government of India adopted the National Population Policy in 2000 (Department of Family Welfare, Government of India, reprint in 2002, p.02).

Against the background of the international feminist movement, various autonomous women's groups and organizations were formed from the late 1970s to the 1980s. Women's movements in India gained power with the adoption of the 1974 Towards Equality report and the 1975 United Nations declaration of International Women's Year. At the time, several women's organizations such as the Hyderabad-based Progressive Organization of Women (POW), the Delhi-based women's organization Stree Sangharash and Samata launched strong protests against physical violence against women such as rape and campaigned for tougher laws. Again, the Progressive Organization of Women, the Mahila Dakshita Samiti, Dahej Virodhi Chetna Mandal, Saheli organized campaign against unjust practice dowry, cases of dowry deaths and tried to create social pressure for challenge this social menace. The country wide agitation and movement which were led by these women's organizations were centered on some burning issues like of Sati following Roop Kanwar's immolation in 1987, the Muslim Women's Bill in 1986, alcoholism, wife-beating, and sexual harassment. Women organizations got success through the changing of dowry law. Women's organizations conducted campaigns in 1985 in favour of Shah Bano's divorce case where the Supreme Court under section 125 granted Shah Bano's demand of getting maintenance from her husband. But the orthodox Muslim community was against this adjudication through

interference of their 'personal law' and in the year 1986 the government introduced the Muslim Women's (Protection of Rights in Divorce) Bill that denied Muslim women's remedy under Section 125 and women activists showed tremendous protest against it (Basu, retrieved March, 05, 2022, pp.08-10). At this, various women's organizations created a mass movement all over India. The Medical Termination of Pregnancies Act of 1971, the Code of Criminal Procedure of 1973, the Equal Remuneration Act of 1976, the Child Marriage Restraint (Amendment) Act of 1979, the Indecent Representation of Women (Prohibition) Act of 1986, the Legal Service Authorities Act of 1987, as well as the Protection of Women from Domestic Violence Act of 2005 are some of the well-known laws affecting women. The constant struggle and pressure of women's movements compelled Indian Government to form National Commission for Women in 1990. Then Supreme Court indicated guidelines on the Prevention of Sexual Harassment at the workplace (*Report on the Working Group on Empowerment of Women for the XI Plan* of 2006, retrived on December 26, 2013, p.55)

In recent times, women have been very conscious and active in defending their rights. They have come out from their domestic spheres and actively participated in the public spheres. They have been struggling for justice, gender equality, and their mental and physical security. Women have been organized themselves against of injustice and

harassment on the basis of orthodox religious and cultural practices, various kinds of physical and mental violence and gender based discriminations at different level of Indian society. Moreover, women organizations have also been fighting against environmental degradation and environmental violence. Women of the backward Dalit families have been suffering from caste violence. The Constitution of India recognizes the right to equality and bans discrimination on the basis of caste, race, religion, sex or birth place as a fundamental right and banes untouchability. Even the Constitution of India prohibits discrimination on the basis of caste, religion or caste in case of public service through article 16 (2). Arrangements have also been made for the appointment of one Minister for the benefit of the tribal people and the Scheduled Castes and Scheduled Tribes people of Madhya Pradesh, Orissa and Bihar as per article 164. Seats also reserved for the people of the Scheduled castes and the Scheduled tribes and women of these castes in the institutions of rural and urban local self-government through the 73rd and the 74th Constitution Amendment Act of 1992 (Basu, 2008, pp. 87-88, 93, 98-99, 402, 404, 281-287). Along with these significant initiatives, the government of India also passed certain laws to defend their rights. Among these legislations, the most important recent law is the Scheduled Caste and the Scheduled Tribes (Prevention of Atrocities) Act 1989 (*India Code: Scheduled Castes and the Scheduled Tribes*

(Prevention of Atrocities) Act, 1989, <https://www.indiacode.nic.in>). But still women have to endure discrimination and oppression on the basis of caste and creed. They are neglected still degraded by people of higher castes and castes. In recent time, Dalit women have been fighting for gender equality. The famous Dalit women's organization in recent time is All India Dalit Mahila Adhikar Manch and the Dalit Women Fight, a small branch of this organization, has been struggling for Dalit women's right in Haryana, Rajasthan, Madhya Pradesh, Bihar and Odisha. This organization fights against child-marriage, physical violence against Dalit women, illiteracy (Nasir, 2019).

In the post-independence period, women activists fought for their political rights as well. They are battling for their right to participate in decision-making and implementation. The women reservation bill, which intends to reserve one-third of seats in the lower house of Parliament and all state legislative assemblies for women, was advocated for by Indian women. This bill was introduced for the first time in 1996. However, it is unfortunate that while this bill was passed in the Rajya Sabha in 2010, it has yet to be passed in the Lok Sabha (H. Dhawan, 2019). The 73rd and 74th Constitution Amendments Acts, however, have provided for the reservation of one-third of seats in Panchayats and Municipalities for women (Basu, 2008). Through this reservation policy, women of rural and urban India get the opportunity to participate in the decision-making

and implementation process of their locality. Moreover, they get the opportunity to attain political empowerment.

Now, the 21st century is the century of women's empowerment. And, the government of India has realized the need for empowering women because the government provides various facilities to women, but sometimes women are not able to avail the facilities provided by the government for various reasons like lack of education, socio-cultural conservatism, excessive control of family heads, etc. The government of India enforced the National Policy for the Empowerment of Women in 2001 with the aim of empowering women and ensuring the development of women in all spheres of life (*National Policy on the Empowerment of Women*, retrieved April 28, 2022). And, the government of India also launched the National Mission for Empowerment of Women in 2010, which aims to empower women through creating coordination between all socio-economic governmental programmes (*About the Mission | Official Website of State Resource Center for Women, Government of Meghalaya, India*, <http://megsrew.nic.in/about-mission>). Some of the important projects undertaken by the government of India for women are free and compulsory elementary education for girls, the Ujjawala project to stop trafficking in women, women's helpline project, Nirbhaya project, etc. (*Women Empowerment Schemes | Ministry of Women & Child Development*, retrieved on April 28,

2022). The government of India also launched the SJSRY project for the economic self-sufficiency of urban poor men and women in 1997 (*EMPLOYMENT BANK*, retrieved on April 29, 2022). And, the government of India launched the Swarnajayanti Gram Swarozgar Yojana, or SJGRY, for rural people's economic development in 1999 (*Swarnajayanti Gram Swarozgar Yojana - SGSY (a Poverty Alleviation Program)*, retrieved on April 29, 2022).

In 2019, Women of all over India have participated spontaneously in the movement for women's equal rights to enter into the religious places or sacred places unlike men and they should not be prevented from entering into the temple during their menstruation age as the practice is prevailing in the Sabarimala Hindu temple of Kerala. Then, women activists and their organizations have also been struggling against several kinds of violent activities against women and girl child during the COVID-19 pandemic. During the lockdown period, India women have suffered from vicious cases of mental and physical tortures within the four wall of their home. They could not leave the house during quarantine time, so they were abused by their husbands or others inside the house while separated from their relatives and familiar persons. And, at that time, the National Commission for Women of India has taken several measures to protect them from mental and physical abuses. Other than that, Yogita Bhayana, who is the head of the

women organization, People Against Rape in India (PARI) and working for protecting women's rights has stated that in the era of social media, Indian women are much more conscious and voiced about their problems in public (P.T.I., 2021, March 25). Therefore, government of India has tried to secure women from violence and abuses through providing women help line number through the NCW, and assisting women through response during emergency time. Other than that the government of India has introduced the Prohibition of Child Marriage Amendment Bill, 2021 in the Lok Sabha for raise the minimum age of marriage for the women into 21 years unlike male to attain gender equality and women empowerment (Goswami, 2021, <https://www.hindustantimes.com>).

Conclusion- Therefore, in the light of the above discussion, it is clear that women have been fighting for their rights since the post-independence period. Various women's organizations played a leading role in this regard. Women activists have been fighting against domestic violence, against poverty and bereavement, against religious conservatism, against gender inequality, and sometimes against caste-based torture and violence. Along with the movement for women's rights, the government of India has been working tirelessly to ensure gender equality and holistic development. The government of India has adopted several laws, policies, and projects on women's development, their security, financial independence, political participation, and

empowerment. In today's age of social media, women have become increasingly unaware of their rights. They are not even keeping secret the atrocities committed against them; they are exposing them in public. These conscious women are the pioneers of women's empowerment in the present age. They are engaged in trying to participate in the various developmental activities of the government in the same way as men. Although they have acquired socio-political rights, they are still fighting for justice in the patriarchal society of India. And the Indian government and different governmental institutions have been continuing their efforts to protect women's rights.

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Violence against Women as a Human Rights Violation: A Psychological Perspective

• Dr. Veena

•• Dr. Mihir Pratap

Introduction- Millions of women worldwide face discrimination and abuse just because they are women. Every woman deserves the right to realize and enjoy her freedom and potential and is equally entitled to personal privileges, from the right of personal security to the right to decide the birth interval. However, many women are not given the proper education or care they need, are forced into prostitution, threatened by domestic violence, etc., due to gender-based discrimination and common inequities that remain. Cybercrime and victimization of women are on the rise and pose a significant threat to the security of women. However, women constitute 50% of the world population, and denying them their fundamental rights hinders and halt any country's development.

Aims and Objectives:

- To analyze the basic human rights of a girl child and woman.
- To examine the incidents and data related to different types of violence against women in India.
- To analyze the psychological factors that are responsible for violent behavior.
- To investigate the laws and acts for the prevention of violence against women in India.

Methodology- The methodology of the study is deductive, observational, and analytical. The approach is diagnostic in

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the concept of India, followed by Multistage studies. This study is based mainly on primary and secondary sources, information, and data.

Women's Rights are Human Rights- The United Nations adopted and proclaimed the Universal Declaration of Human Rights in 1948. In the 1970s, the global feminist movement started changing the world. Women's engagement in transnational processes transformed conventional human rights in theory and practice (as violations were perpetuated mainly by state actors in the public sphere) and changed State doctrine to include positive responsibility. Important steps towards the realization of women's and girls' rights were made at "The International Conference on Population and Development (ICPD)" held in Cairo in 1994, the "Fourth World Conference on Women" held in Beijing in 1995, and the so-called Beijing +5 conference (a five-year review of the Beijing conference) in New York in 2000. In the early 1990s, the United Nations recognized that women and girls also have human rights. The United Nations Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), 1980 ensures that all women have the right to equal opportunities in political and public life, including the right to vote, education, healthcare, and employment. The United Nations Declaration on the Elimination of Violence Against Women (DEVAW), 1993 recognizes violence against women as an obstacle to equality, development, and peace. According to the DEVAW there are fundamental rights of every individual for women and a girl child also, like the right to life, the right to equality, the right to liberty and security of a person, the right to equal protection under the law, the right to be free from all form of discrimination etc. Talking about women's self-respect, the right to work and not just work but in favorable conditions (free of sexual harassment) and last right not to be subjected to torture or other inhuman or degrading treatment or punishment are also crucial.

Violence against women- Violence against women and girls is one of the most widespread violations of human rights, as Kaur (2011) commented. It can include physical, sexual, psychological, and economic abuse, cutting across race, culture, wealth, and geography. This statement is amply justified by the events taking place in India every day. It takes place everywhere in the home, on the streets, in schools, the workplace, in farm fields, refugee camps, and is extremely common in places like red light areas and prisons (Golden 2004).

Underreporting is observed even in developed countries. Rennison (2002) studied 366,460 cases of attempted and completed rapes and sexual assaults on females in the US between 1992 and 2000 and found that 63% of completed rapes, 65% of attempted rapes, and 74% of completed and attempted sexual assaults against females were not reported to the police. She concluded that the closer the relationship between the victim and the offender, the greater the likelihood that the police would not be informed about the rape or sexual assault.

Crime against women increased 7.3% from 2018 to 2019, and crimes against Scheduled Castes also went up 7.3% in the same period, according to the annual National Crime Record Bureau's "Crime in India" 2019 report. Uttar Pradesh reported the highest number of cases in both categories in terms of absolute numbers. But Assam reported the highest rate of crimes against women (per lakh population), while Rajasthan had the highest rate of crimes against Scheduled Castes.

A total of 4,05,861 cases of crime against women were registered during 2019, showing an increase of 7.3% over 2018 (3,78,236 cases). Majority of cases under crime against women under IPC were registered under 'cruelty by husband or his relatives' (30.9%), followed by 'assault on women with intent to outrage her modesty' (21.8%), 'kidnapping & abduction of women' (17.9%) and 'rape' (7.9%). The crime rate registered per lakh women

population is 62.4 in 2019 compared to 58.8 in 2018," says the NCRB report.

According to the National Crime Records Bureau (NCRB), the absolute number of crimes against women reported in 2020 amounted to 9,782 cases from 12,902 in 2019. Assaults against ladies were 938 in 2020 from 1,088 out of 2019, and sexual harassment remained at 862 cases in 2020 against 644 out of 2019. An aggregate of 967 cases of assault was accounted for in 2020 against 1,231 in 2019, a decrease of 21%. Stalking likewise saw a 40% drop, with 235 cases announced in 2020 contrasted with 388 the prior year.

35,331 crimes against women were recorded throughout the 19 metropolitan cities in 2020, a 21.1% decrease from 2019 (44,783 cases). Most of the crimes against women were classified as 'Cruelty by Husband or His Relatives' (30.0%), followed by 'Assault on Women with Intent to Outrage her Modesty' (23.0%), 'Kidnapping & Abduction of Women' (16.8%) and 'Rape' (7.5%). In 2020, the crime rate per lakh women population was 56.5, compared to 62.3 in 2019.

However, 87% of rapes take place in the house and not in the street (Sahu, Mohanty, and Das 2005). Exhaustive work done on rape suggests that the incidence of rape varies cross-culturally; a high incidence of rape is embedded in a distinguishably different cultural configuration than a low incidence of rape (Report of the Secretary-General 2006, Azikiwe et al 2005) Rape is known to occur all over the world, whether during peace or war, but it is more common in some countries than others (Sanday, 1981).

The Committee on the Elimination of Discrimination against Women (CEDAW) classifies India as a state where 'Laws are generally consonant with CEDAW, with little effective enforcement; improving the situation of women appears to be a low priority for the government' (Hudson and Brinton 2007).

The Psychology behind the Violent Behaviour- Violence against women like rape and domestic violence by men has

occurred throughout recorded history and across cultures. McKibbin, Shackelford, Goetz, and Starratt (2007) have studied rape from an evolutionary psychological perspective. Evolutionary psychology is a powerful heuristic that allows researchers to develop and test novel hypotheses about complex behaviors such as rape. They propose that rapists be characterized as belonging to one of several types, distinguished by individual differences as well as by the circumstances in which they are predicted to commit rape such as:

- Disadvantaged men
- Specialized rapists
- Opportunistic rapists
- High-mating-effort rapists
- Partner rapists

One report suggests that the rise in population has led to a fall in values, and hence crime has risen (Naidu and Nayak 2007). The criminalization of politics is blamed by another for the rise in crime against women (Mukherjee, Rustagi and Krishnaji 2001). Blame has also been apportioned to India's trendy film industry, which thrives on typecasting women and often glorifies crimes against them (Dasgupta 1996). The National Family Health Survey (NFHS)-3, one of the most authoritative surveys in the country, surveyed several aspects of gender equality and women's empowerment in India. When the norm about men's 'right' to beat their wives was explored, it was found that overall, more women aged 15-49 (54%) agree with one or more reasons for wife-beating as compared to 51% of men in the same age group (Kishor and Gupta 2009).

More than sex, rape is used to demonstrate power over women, to humiliate and break them. Not all rapes involve violence, nor do all rapists hurt their victims. The interaction between a rapist and the victim is complex, and any attempt to simplify it goes wrong (Hauer and Armentrout 1978). The classification of rape as sexual, aggressive, and sex-aggressive diffusion, also tells us that the causes of rape could

be very different from case to case (Cohen, Garofalo, Boucher and Seghorn 1971).

Domestic violence is a very critical form of violence against women. Domestic violence or abuse is a pattern of aggressive and intimidating behaviour that abusers use to control their intimate partners through fear and intimidation, often including the threat or use of violence. There are many factors which are responsible for the analysis of Psycho-social factors of violence against women in society. The Indian society is freight with amazing Paradoxes and contradictions. The policy and programme initiatives for women empowerment, for instance have risen dramatically in the past two decades and this is the period where the Indian society has registered exponential increase in crime against women. Domestic violence has totality received considerable attention. The existence of this problem is a poor pointer to our social Progress and all pursuits of modernization are rendered null and void in a society where women become unsafe within the domestic setting.

Historically, domestic violence has been identified as a social disease(Gilligan, 1996; Alpert, 2002) and as a major public health crisis (Department of Justice, 2007; National Center for Injury Prevention and Control, CDC, 2011; Hamel, 2012; Black, Basile, Breiding et. al;. 2013; Eckhardt, Murphy, Whitaker, et. al, 2013).

Domestic violence against women and girls is a grave violation of their rights so safety, dignity and liberty. It refers to any kind of violence in the house being perpetrated by the members of family itself. The violence manifests in the forms of mental. Physical economic social and psychological suffering. It often carries long term mental and physical consequences for women and girls. The factors of domestic violence are rooted in male dominated society, where the women are not treated equal. Even in the matriarchal societies, the problem of domestic violence is gradually increasing. Women and girls are becoming the victims exploitation, abuse and crime against them are rising steadily.

Some psychological theories also strive to investigate the causes and reasons behind the act of domestic violence but no single theory would fully explain domestic violence against women, since it is multi-factorial. According to psychoanalytical theory sexual and instinctive drives known as the libido which derives its energy from the Eros basically motivates human behaviors. In case of repression of such libidinal urges aggression or abusive behaviour emerged. Social learning theory revealed that humans learn behaviour by observing them in others, therefore men who observed their parents physically abusing each other were almost three times more likely to have hit their own wives. Johnson M.P., Ferraro K.J. (2000). Bandura's Power based theory affirmed that the present day marital violence by men towards their wives is an attempt to establish or maintain power when her behaviour becomes unacceptable to them, Bandura A. (1973). A foreign psychologist, John G. Taylor gave 1000 such studies in which men persecuted their partners. He found in his study that the following psychological behaviors were found in such violent men -

The feelings of jealousy- Is such that there is a sense of jealous in such violent people that they envy women and because of this they do not want to see them grow.

Control work behaviour- These people have a tendency to control the behavior of others. They take min mox on every small thing. Do not go here, Do not go out, why do not wear it, do not wear this, do not wear that etc. They want to take total control on their wives and for this they use their power to control their wives. Scully and Marol (1985) interviewed 114 convicted, incarcerated rapists. Their analysis revealed that a number of rapists used sexual violence as a method of revenge and/or punishment while others used it as a means of gaining access to unwilling or unavailable women. In some cases, rape was just a bonus added to burglary or robbery. Rape was also a recreational activity and described as an 'adventure' and an 'exciting' form of impersonal sex which gained the offender power over his victim(s).

Separatist behaviour- owners of such violent personality want women to be completely separated from their maternal family and friends, and completely dependent on their husbands. Do not have any connection with anyone else so that they can control and assault.

Force sex behaviour- Such a person wants to suppress his wife by using his full superiority and power through establishing a sexual relationship against her desire.

The men's conservative thinking- Those men with sexual sensibilities are owners of conservative thinking and consider themselves to be the king of their palaces or house, which holds the traditional rights to torture the wife. Burt (1980) in her seminal work on 'rape myth', tested hypotheses derived from social psychological and feminist theory that acceptance of rape myths can be predicted from attitudes such as sex role stereotyping, adversarial sexual beliefs, sexual conservatism, and acceptance of interpersonal violence. Personality characteristics, background characteristics, and personal exposure to rape, rape victims, and rapists were other factors used in predictions. Results from regression analysis of interview data indicated that the higher the sex role stereotyping, adversarial sexual beliefs, and acceptance of interpersonal violence, the greater a respondent's acceptance of rape myths. In addition, younger and better educated people revealed less stereotypic, adversarial, and pro-violence attitudes and less rape myth acceptance.

Antisocial personality disorder- Lying fraud, penalty for others for happiness for personal gain.

Borderline personality disorder- such people are extreme idealists and they also have masters of bipolar personality disorder, some in the outside and some in the house.

Soul-wide or self centered personality disorder- the masters of such a personalities are loving themselves, just for example Hitler was the master of a self born personality, therefore he believed strongly in controlling others.

Shainess (1977) has discussed some of the key qualities of the personality of such men who oppress women like The

Obsessive Compulsive type , The Depressive Type of personality and The Passive aggressive type - **Ambiguity Forgetfulness, Blaming, Lack of healthy Anger, Fear of Dependency, Fear of Intimacy etc .**

Several studies have been found in which the "mood instability," "aggressiveness" and "impulsiveness" personality traits are associated with the characteristics of borderline and antisocial personality disorders (PDs), which are frequently identified as being related to intimate partner violence type of domestic violence (Fower and Westen,2011). The "mood instability" personality trait applies to individuals tending towards sad or irritable moods and fluctuations in their temperaments and beliefs, exhibiting impulsive and radical reactions. Such traits are also characteristics of borderline personality disorder (Carvalho,2011). The "aggressiveness" trait is associated with people who are disregarding of others in order to get what they want, are incoherent and are usually violent; whereas the "impulsiveness" trait relates to individuals who exhibit impetuous reactions, a fondness for violent activities, a knack for inventing excuses and a tendency toward getting into trouble (Carvalho, 2011). The latter two traits (aggressiveness and impulsiveness) evidence characteristics of antisocial personality disorder (APA, 2014).

Rights of women in India- To prevent violence, Universal Declaration of Human Rights recognizes the basic rights and freedoms every human being is entitled to. Article 1 of the declaration reads, "All human beings are born free in equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in spirit of brotherhood." Men and women equally partake inhumanity by birth, not with standing the biological difference, in terms of anatomy. Differences and disparities between men and women are in fact, based on differential upbringing and conditioning among the genders, and are therefore socially constructed.

Women's Safety Laws to protect violence against women in India- Many laws are already in practice to safeguard women's basic rights in our country. For instance, provisions like Protection of Women from Domestic Violence Act (2005), Sexual Harassment of Women at Work Place (Prevention, Prohibition & Redressal) Act (2013), Indian Divorce Act (1969), Equal Remuneration Act (1976), Hindu Widows Remarriage Act (1856), Muslim women (protection of rights on divorce) Act (1986) and many more are in use. On top of all this, society needs to change its mentality, perspective, and psyche to ensure the least usage of the aforementioned laws.

Conclusion- A woman being inferior to a man is a falsehood that has been impressed since time immemorial. However, being human, they have the same rights at par with men. But to impart the benefit of the basic human rights, a general awareness should be created in the society regarding their importance of women, their social status and legal rights, etc. Nowadays in all sectors of the economy women's concerns have been flagged. However, the challenges lie in converting these into reality. Nothing can be achieved without women's overall development and involvement in national development. In other words, we can conclude that by giving honor and respect to women, we can prevent and minimize the incidents of violence against women; thereby building a healthy society. Thus we want to conclude the work with the words of Justice A.S. Anand -

"Awakening of the collective consciousness is the need of the day. Change of heart and attitude is what is needed".

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