ROLE OF GENDER IN DEMOGRAPHIC PROCESSES

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"Gender equality is more than a goal in itself. It is a precondition

for meeting the challenges of reducing poverty, promoting

sustainable development and building good governance."

-Kofi Annan

Abstract

According to World Health Organization, "Gender refers to the characteristics of women, men, girls and boys that are socially constructed. This includes norms, behaviours and roles associated with being a woman, man, girl or boy, as well as relationships with each other. As a social construct, gender varies from society to society and can change over time."

Gender is being defined in a broader sense by social scientists. It focuses on how societies are organised rather than individual characteristics. The importance of gender as a social institution is more important than differences between men and women.

Key words: Sex Ratio, Fertility, Mortality, Migration, Gender etc.

WHAT IS DEMOGRAPHY

Demography is the study of human population, including their size, composition, and spatial distribution, as well as the processes by which they change. Demography is influenced by births, deaths, and migration, which together produce population stability or change. Aside from demographic problems, demographic research provides age-specific data for planning, scientific, technical, and commercial objectives.

There is a demographic cycle of five stages through which a nation passes.

1. High Stationary (high birth rate, high death rate, population remains stationary)

2. Early Expanding (death rate decline, birth rate remains unchanged)

3. Late Expanding (death rate declines further, birth rate tends to fall, birth exceeds deaths, population continues to grow)

4. Low Stationary (low birth rate, low death rate, population stationary)

5. Decline (population declines, birth rate is lower than death rate)

DIFFERENT ASPECTS OF DEMOGRAPHIC PROCESSES BASED ON GENDER-FERTILITY

Fertility is an important determinant of population growth. It is important to distinguish between fecundity and fertility right away. The physiological capacity to reproduce is referred to as fecundity. Fertility, on the other hand, refers to an individual's or a group's ability to reproduce. Fertility can be estimated using birth data, even if there is no direct measurement of fecundity. Only live births, that is, children born alive, are included in the crude birth rate, which is an essential metric of fertility.

Factors like female infanticide, desire for male child and sex ratio plays a major role in the fertility trend. The choice of son over daughter is a primary reason for female infanticide in many nations throughout the world. According to a first-ever global study on female infanticide conducted by Asian Centre for Human Rights, a Delhi-based NGO dedicated to the protection of human rights. In South Asia, the dowry system contributes to female infanticide by making daughters "an expensive economic burden."

The fertility rate, or the number of births per woman of reproductive age, is the primary factor that influences the number of new births in a community. Even if the fertility rate is high, the number of births will be minimal if there are just a few women of reproductive age. As a result, the age structure of women in a population is important– the proportion of women in reproductive age dictates the number of births.

Every country on the planet has progressed far enough into the demographic transition that greater mortality is now correlated with faster population growth rather than lower. As a result, what happens to population increase is determined by changing fertility.

The national Total Fertility Rate (TFR) is estimated to be still marginally higher than the replacement rate. TFR is the number of children a woman has at the conclusion of her reproductive years.

The latest estimates (for 2017) by the Sample Registration System (SRS) under the Registrar General of India (RGI) has pegged the country's TFR at 2.2, marginally more than the replacement rate which stands at 2.1. The average number of children a woman needs to sustain the population at a steady size is referred to as the replacement rate.

The Sample Registration System (SRS) is a large-scale demographic survey that provides annual credible estimates of infant mortality, birth rate, death rate, and other fertility and mortality indicators at the national and subnational levels.

Uttar Pradesh (3.0), Bihar (3.2), Madhya Pradesh (2.7), Rajasthan (2.6), Assam (2.3), Chhattisgarh (2.4), and Jharkhand (2.5) — which account for nearly 45 percent of the total population in the 2011 Census — have higher TFRs than the national average of 2.2. Gujarat and Haryana both had a TFR of 2.2, which is higher than the national average but lower than the replacement rate.

Kerala (1.7), Tamil Nadu (1.6), Karnataka (1.7), Maharashtra (1.7), Andhra Pradesh (1.6), and Telangana (1.7) are all relatively prosperous southern states with fertility rates and TFR below the

replacement rate. TFRs were also expected to be lower in West Bengal (1.6), Jammu & Kashmir (1.6), and Odisha (1.9) in 2017.

According to the most recent report from 2017, the TFR fell from 5.2 to 4.5 between 1971 and 1981, and from 3.6 to 2.2 between 1991 and 2017.

The rural-urban split, as well as women's literacy levels, have different trends. According to the SRS, although an "illiterate" woman is more likely to have 2.9 children on average, a "literate" woman is more likely to have 2.1 children. The TFR for a woman with a graduate degree or higher is 1.4 children. Similarly, TFR has been reported to be lower in urban settings than in rural areas.

The Census also shows a fall in fertility rates, which is reflected in total population increase. After the 1971 Census, decadal population growth slowed in the period between the 2001 and 2011 Censuses.

SEX RATIO

One of the most basic demographic characteristics is population enumeration by gender composition, which allows for meaningful demographic analysis. The Indian census has a tradition of releasing data on many characteristics of the population based on gender composition. In many ways, changes in gender composition reflect the underlying social, economic, and cultural trends of the society.

The sex ratio is defined as the number of females per 1000 males in the population and is a key sociological indicator for determining the degree of gender equality in a culture at any given period. It should be mentioned that in nature, the sex ratio is supposed to be almost equal. The key contributory elements that cause variations in the sex ratio, according to experts, are sex disparity in mortality, sex selective out migration, and skewed sex ratio at birth.

In India, the male-to-female ratio is imbalanced and has continued to rise and expand in numerous forms. This has piqued policymakers' and planners' interest in reversing the trend and restoring parity.

As per the provisional results of Census 2011, total population of India is 1,21,01,93,422 which comprises of 62,37,24,248 males and 58,64,69,174 females with the sex ratio of 940 females per 1000 males. Madhya Pradesh has a total population of 7,25,97,565 with 3,76,12,920 males and 3,49,84,645 females with sex ratio of 930.

As per Census 2011, top five states/Union territories which have the highest sex ratio are Kerela (1,084) followed by Puducherry (1,038), Tamil Nadu (995), Andhra Pradesh (992) and Chhattisgarh (991). Five states which have the lowest sex ratio are Daman & Diu (618), Dadra & Nagar Haveli (775), Chandigarh (818), NCT of Delhi (866) and Andaman & Nicobar Islands (878).

MATERNAL MORTALITY RATE

According to the World Health Organization, maternal death occurs when a woman dies while pregnant or within 42 days of giving birth from any cause connected to or exacerbated by the pregnancy or its care.

The maternal mortality rate (MMR) is defined as the number of maternal deaths per 1,000 live births within a certain time period. The United Nations' Sustainable Development Goals (SDGs) 3.1 targets to lower the global maternal death rate to less than 70 per 100,000 live births. MMR dropped from 122 in 2015-17 to 113 in 2016-18, down from 130 in 2014-2016.

Assam (215), Uttar Pradesh (197), Madhya Pradesh (173), Rajasthan (164), Chhattisgarh (159), Odisha (150), Bihar (149), and Uttarakhand (149) are the states with the highest population density (99). Karnataka (92), Andhra Pradesh (65), Tamil Nadu (60), Telangana (63) and Kerala (63), all in the south, have lower MMRs (43).

The National Health Mission's Janani Suraksha Yojana aims to link cash assistance to institutional deliveries. On the 9th of every month, the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) provides a regular day for pregnant women to get free, comprehensive, and high-quality antenatal care. Guidelines for the Pradhan Mantri Matru Vandana Yojana and LaQshya.

Maternal mortality in a region is an indicator of women's reproductive health. India's efforts to reduce maternal mortality have previously been recognised by the WHO. India must pay special attention to states with a higher maternal mortality rate.

INFANT MORTALITY RATE

The Infant Mortality Rate (IMR) is the number of children under the age of one year who die per 1000 live births in a given year. According to the UN Millennium Development Goals (MDG), from 1995 to 2015, the goal was to reduce child mortality by two-thirds.

In India, the rate of decline was about 57 percent. The infant mortality rate (IMR) has decreased from 80 deaths per 1000 live births in 1995 to 33 deaths per 1,000 live births today (in 2017: according to SRS bulletin 2019).

Infant Mortality Rate has to components: (1.) Newborns who die within one year of birth; (2.) Neonatal Mortality Rate (NMR): neonates who die within one year after birth. It's calculated as the "number of deaths in the first 28 days of life per 1,000 live births in a given year or period."

According to UNICEF, the global NMR in 2018 was 18 deaths per 1000 live births, whereas in India, the NMR was 23 deaths per 1000 live births (approximately 7,000 newborn deaths every day). Both globally and in India, the rate of decline in NMR is relatively gradual. It's almost a third of the pace of IMR reduction.

The infant mortality rate is calculated as the number of newborn deaths (under one year) per thousand live births. IMR is reported to be 44 at the national level, ranging from 48 in rural areas to 29 in urban areas. It ranges from 12 in Kerala to 59 in Madhya Pradesh among the larger states. In every state, female infants had a greater mortality rate than male neonates. At the national level, IMR decreased by 30.9 percent between 1999 to 01 and 2009 to 11. The reduction in the larger states ranges from 51.3 percent in Tamil Nadu to 5.4 percent in Kerala. The fall in IMR in rural regions ranges from 53.3 percent in Tamil Nadu to 2.3 percent in Kerala. In urban regions, the fall in IMR ranges from 43.6 percent in Rajasthan to 12.5 percent in Andhra Pradesh. IMR has increased in Assam and Karnataka's urban areas, which could be due to sample fluctuations.

The national neo-natal death rate is 31 percent, with rates ranging from 17 percent in urban areas to 34 percent in rural areas. Neonatal mortality in the larger states ranges from 41 in Madhya Pradesh to 7 in Kerala. At the national level, the proportion of neo-natal mortality to total newborn deaths is 69.1%, ranging from 58.2 percent in urban regions to 70.9 percent in rural areas. Punjab (79.9%) had the largest rate of neo-natal fatalities to newborn deaths among the larger states, while Assam had the lowest (53.9).

MIGRATION

The movement of people from one location to another is known as migration. It might be short-term or long-term, voluntary or forced, international or international, and over a short or long distance.

The study of migration resulting from diverse social, economic, or political reasons is an essential aspect of population research. For a vast country like India, studying population mobility in different sections of the country aids in better understanding the society's dynamics. At this juncture in the country's economic development, data migration profiles of population have become more relevant, especially as many states experience rapid economic development, notably in fields such as manufacturing, information technology, and service sectors.

A person is deemed a migrant if she or he is enumerated in census at a location other than where he or she was born. This could be due to marriage—which is the most prevalent cause for female migration—or to job, which is the case for both males and females, and so on. Many people return to their birthplace after a period of time away. To capture such population movements, census data on migration is collected by last, which aids in a better understanding of the present migratory picture. According to the 2001 census, roughly 307 million people in India migrated by place of birth. About 259 million (84.2%) of them moved from one section of the state to another, that is, from one village or town to another village or town. 42 million people (2% of the population) are from outside the country.

According to Census 2001 data on migration by last residence in India, the total number of migrants was 314 million. 268 million (85 percent) of these migrants by last residence were intra-state migrants, meaning they moved from one state to another. Interstate migrants accounted for 41 million (13%) of all migrants, while 5.1 million (1.6%) came from outside the country.

Opportunities for job, education, and other services in urban regions have been a pull factor for migrants moving from rural to urban areas, as well as from smaller towns and cities to larger metropolis. For various reasons, there is also migration in the reverse direction (push factor) from urban to rural areas.

During the last decade, 61 million intra-state and inter-state migrants migrated to rural areas and 36 million to urban areas, out of a total of 98 million intra-state and inter-state migrants in the country. In comparison to migration from rural to urban regions, the number of people migrating out of rural areas (73 million) to another rural area (53 million) was fairly significant (20 million). Approximately 6 million people relocated from metropolitan areas to rural areas. According to the census, Maharastra ranks first in terms of net migrants by last residence during the past decade, i.e., the difference between in-migration and out-migration in each state, with 2.3 million net migrants, followed by Delhi (1.7 million), Gujrat (0.68 million), and Haryana (0.67 million). The two states with the most net migrants migrating out of the state were Uttar Pradesh (-2.6 million) and Bihar (-1.7 million). According to data obtained in Census 2001 for migration by last residence, there are a variety of causes for relocation. The majority of female migrants identify 'Marriage' as the reason for their travel, particularly when moving within the state. The main causes for migration among males are 'work/employment' and 'education.'

The causes for migration differ by gender; for example, two-thirds of women moved from their previous domicile due to marriage. With increasing migration distance, the gender difference in economic migration (job, business, and education) widens. Men migrated 3.2, 4.3, and 7.4 times for every women who relocated for job, business, or education within district, across districts but within states, and across states, respectively.

Work and business account for one-third of all migrations among males, and it is also the single most important motivation for men to migrate. While women's migration for marriage is skewed toward closer distances, men's migration for job appears to be unaffected by distance.

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