

# THE STATUS OF WOMEN IN SUSTAINABLE DEVELOPMENT OF ODISHA STATE: A SYNOPTIC VIEW

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## 1.0 INTRODUCTION

Women and girls, everywhere, must have equal rights and opportunity, and be able to live free of violence and discrimination. Women's equality and empowerment is one of the 17 Sustainable Development Goals, but also integral to all dimensions of inclusive and sustainable development. In short, all the SDGs depend on the achievement of Goal 5. Around the world, women do the vast majority of the unpaid work, including child care, cooking, cleaning and farming. This unpaid work is essential for households and economies to function, but it is also valued less than paid work. UN Women expert Shahra Razavi reveals the real value of unpaid care, and how we can reduce the burden on women by tackling entrenched stereotypes. UN Women's new flagship report provides a comprehensive and authoritative assessment of progress, gaps and challenges in the implementation of the Sustainable Development Goals (SDGs) from a gender perspective. The report monitors global and regional trends in achieving the SDGs for women and girls based on available data, and provides practical guidance for the implementation of gender-responsive policies and accountability processes. Gender equality by 2030 requires urgent action to eliminate the many root causes of discrimination that still curtail women's rights in private and public spheres. For example, discriminatory laws need to change and legislation adopted to proactively advance equality. Yet 49 countries still lack laws protecting women from domestic violence, while 39 bar equal inheritance rights for daughters and sons. Eliminating gender-based violence is a priority, given that this is one of the most pervasive human rights violations in the world today. Based on data from 87 countries, 1 in 5 women and girls under the age of 50 will have experienced physical and/or sexual violence by an intimate partner within the last 12 months. Harmful practices, such as child marriage, steal the childhood of 15 million girls under age 18 every year. Women do 2.6 times more unpaid care and domestic work than men. While families, societies and economies depend on this work, for women, it leads lower earnings and less time to engage in non-work activities. In addition to equal distribution of economic resources, which is not only a right, but accelerates development in multiple areas, there needs to be a fair balance of responsibility for unpaid care work between men and women. Sexual and reproductive rights are critical in their own right. Shortfalls in these multiply other forms of discrimination, depriving women of education and decent work, for example. Yet only 52 per cent of women married or in a union freely make their own decisions about sexual relations, contraceptive use and health care.

While more women have entered political positions in recent years, including through the use of special quotas, they still hold a mere 23.7 per cent of parliamentary seats, far short of parity. The situation is not much better in the private sector, where women globally occupy less than a third of senior and middle management positions. UN Women acts to empower women and girls across all its programmes and advocacy. With stepped up action on gender equality, every part of the world can make progress towards sustainable development by 2030, leaving no one behind. Sustainable Development refers to a development process which enhances women's capacity to create and consume wealth on a lasting basis. It requires, among other things, a socioeconomic political and cultural environment which enables people to engage and sustain the development process. The political system should provide stability for women to engage in production. Intra-ethnic conflicts, tribal wars and social tensions, as well as denial of basic human rights, constrain efforts to promote sustainable development. The social relationships between individuals and communities can either promote or constrain sustainable development. Social security is thus one of the necessary prerequisites for promoting such development.

The empowerment of women needs to develop and utilize women's full potential as resources for national development in its economic, political and socio-cultural matters. Economic growth does not necessarily lead to human development. The Human Development Report 1996 revealed that there is no automatic link between economic growth and human development. If these links are forged in a planned way and with determination, they can be mutually reinforcing and economic growth will effectively improve human development. The important factors leading to the disadvantaged position of women are their ignorance, powerlessness, illiteracy and vulnerability. The strategy of women's development comprises social and economic empowerment of women through attitudinal change towards girl child and education, training, employment, support services and emphasis on women's rights and law.

### 1.1 Status of women in India:

Women indeed, have come a long way in all spheres which were hitherto exclusive male bastions. However, the Human Development Report (HDR) has exploded the myth that women have progressed. Rather, women have still to go a long way in such crucial areas as employment, education, health or decision-making. The extent of this participation is called the Gender Empowerment Measure (GEM). India is pegged very low on the GEM. It is matter of great disappointment that women contribute just 10 percent of national income.

Status of women referred to as a position in a social system or a subsystem which is distinguishable from and at the same time related to other positions through its designed rights and obligations, However, status involves comparison and grading. (Committee on the status of women in India-1974)

In general, the status of women is evaluated in comparison to the status of men. The major empirical indicators that are utilized for this evaluation are the demographic status, the health status, the literacy status, the employment rates and patterns and the political status.

Generally speaking, there have been a number of improvements in women's lives in the past 20 years. For example, female life expectancy is increasing; more girls are going to school; more women are in the paid work force; and many countries have introduced laws to protect women's rights. However, the gender divide remains. There has been "no breakthrough in women's participation in decision-making processes and little progress in legislation in favour of women's rights to own land and other property" according to Mr. Kofi Annan, in his role as Secretary General of the United Nations.

The term 'Gender Justice', 'Women Empowerment' and 'Women welfare' are in the limelight in the social and economic development analysis of both developed and developing nations. The debate on gender justice /women empowerment /women welfare was at the centre stage in the international arena in the 1994 U.N. conference in Cairo, the Fourth U.N. International Conference on Women at Beijing in 1995 and the U.N. Social Summit at Copenhagen in March, 1995.

The U.N. International conference on Population and Development (ICPD) 1994, in its guiding principles states that the human rights of women and the girl child are an inalienable, integral and indivisible part of universal human rights. The full and equal participation of women in civil, cultural, economic, political and social life at the regional, national and international levels and the eradication of all forms of discrimination on grounds of sex are priority objectives of the intellectual community.

The declaration of the decade 1976-85 as the women's decade by the United Nations brought about a significant change in the status of women and gender equality throughout the world. There has been a perceptible rise in the activities directed towards women's emancipation for social, economic and political justice. The contemporary needs of women are being understood by society in a better way. The debate about the role of women in society and the need for ensuring social, economic political and gender justice to them continues with greater vigour.

There is a growing awareness among nations that women need to play a significant role in all aspects of development process. At the international level, the recent resurgence of feminism has led to greater attention being paid, within the United Nations and associated agencies, to the importance of women in development planning. One outcome of this new awareness has been an increased emphasis upon women's education and empowerment.

J.S Mill rightly said that the subjugation of women is wrong in it and is one of the chief hindrances to human improvement. Writing in Young India in 1918, Gandhiji said "a woman is the companion of man gifted with equal mental capacities; she has the right to participate in the minutest details of the activities of man. She has the same right to freedom as he has. By sheer force of vicious custom, even the most ignorant and worthless, men have been enjoying superiority over women which they do not deserve and ought not to have."

In order to awaken the people, it is women who have to be awakened. Once they are on the move; the household moves, the village moves and the country moves. Since the unit of attitude change in any society is the family, our best efforts have to be directed in changing the perception and attitudes of most tradition-bound persons in the family-the women (Pandit Nehru).

As Pandit Nehru remarked "the greatest revolution in a country is the one that affects the status and living conditions of its women." Today, because of the national need, the changing pattern of society and the desire to contribute towards the general good, and their own satisfaction and economic relief, women are emerging in various fields of service.

To bring women into the main stream of development process and in order to improve their status in the society, the Indian government has made a significant shift in the approach from 'Welfare during Fifties' to 'Development during Seventies' and to 'Empowerment during the Nineties'. During Nineties major thrust in respect of women was to make them economically independent and self-reliant, while in respect of children, efforts were made to ensure their survival, protection and development with special focus on girl child and adolescent girl. Constitution of India has also given support and strength to them as its Article 14 confers equal rights and opportunities for men and women in political, economic and social spheres. Article 15 provides for equality of opportunities in matters of public appointment for all citizens. Article 39 mentions that the state shall direct its policy towards providing to men and women equally the right to means of livelihood and equal pay for equal work. Article 42 directs the state to make provisions for women where as Article 51(A) (e) imposes a fundamental duty on every citizen to renounces practices derogatory to the dignity of women. Certain legislations relating to safeguard of the interest of women and girls, like-The Dowry Prohibition Act, 1961 (as amended up to 1986), The Child Marriage Restraint Act, 1976, The Immoral Traffic Prevention Act, 1956 (as amended and re-titled in 1986), Indecent Representation of Women(Prevention) Act, 1986, etc. have also come about in recent times. The land mark achievements of both 73<sup>rd</sup> and 74<sup>th</sup> constitutional Amendments in 1993 have also empowered women by enabling their participation in the Panchayati Raj institutions (PRIS) and local bodies. However, despite the constitutional support, developmental policies and programmes did not yield better results and the impact has been far below the expectations. The National Perspective Plan for Women (1988 – 2000) evaluated the impact of developmental plans and programmes and focused on strategies responsive enough to meet women's need. Religious norms, caste structures, poverty, ignorance, social taboos and class values are some of the constraints which impose hardship on growing girls and women. It also reviewed the situation of women in rural development, agriculture, employment, supportive services, education, health, credit, legislation, political participation and voluntary action while recommending inter-linked strategies towards overall development of women. The National Plan of Action for the children and Girl child (1991-2000) Plan for ensuring survival, protection and development of children with special gender sensitivity are made for girl children.

In 1971 following resolution of the Ministry of Education and Social Welfare, the committee on the status of women in India was constituted. The presentation of the CSW Report "Towards Equality" coincided with the celebration of the year 1975 as International Women's Year. The year 1975 is important as a watershed for the change in direction on the question of women's status and role.

The main contribution of this report was that it recognized the multiple factors such as demographic trends, religion, industry, laws pertaining to polygamy, age at marriage, dowry, divorce etc., right to participation in economic and political activities, educational development and the influence of mass media - on the status of women.

Generally, the status of women has two dimensions; (i) the extent of control enjoyed by women over their lives, and (ii) the extent to which they have access to the decision making process and are effectively in position of power and authority. Besides, certain indicators such as level of literacy, employment, political participation, decision about marriage, management of domestic affairs, etc. are also adopted to assess the status of women. Some indicators of the status of women in India are stated as follows:

### 1.1.1 Sex Ratio in India:

According to 2011 census report of India ,its final total population is 1,210,726,932 (1.21 million) which is less than the population of China (1,341.0 million as on 01.11.2010) and more than the population of U.S.A (308.7 million as on 01.04.2010), Pakistan (184.8 million as on 01.07.2010), Bangladesh (164.4 million as on 01.07.2010),Japan (128.1 million as on 01.10.2010). Out of the total population of India male population is 623,700,000 (623.7 million) and female population is 586,500,000 (586.5 million). The child population in India (0-6 years age) is 158,789,287 out of which 82,952,135 males and 75,837,152 female. The sex ratio in India is decent and improving year by year. Per 1000 males there are 940 females (total population), 914 girls (0-6 age child population) 944 females (population aged 7 and above) but it has gone down badly in some states like Haryana and Punjab. Haryana has the lowest sex ratio of 877 females per 1000 males. The state of Kerala with 1084 females per every 1000 males has the best sex ratio in India. Union Territories of India Daman & Diu have the lowest female sex ratio 618 while Pondicherry has the highest female sex ratio .Rural sex ratio of India is 947 females per 1000 males where as the urban sex ratio is of 926 females per 1000 males. The status of south India has the best sex ratio of females per 1000 males. There is some extent of gender bias in India which is responsible for this decline in female ratio however it has started to show some improvement in the last 20 years.

### 1.1.2 Literacy Rate and Education of women in India :

As per population census of India 2011, the literacy rate of India has shown as improvement of almost 9 percent in last 10 years. It has gone up to 74.04% in 2011 from 64.84% in 2001. The male literacy rate is 82.14% and female literacy rate is 65.46%. The literacy gap between male and female is 16.68 percent. Kerala is a state with highest literacy rate 93.9% in India. Lakshadweep and Mizoram are at second and third position with 92.3% and 91.06% literacy rate respectively. Bihar has 63.08% literacy rate which is lowest in terms of literacy rate in India. ([www.indiaonlinepages.com/population/literacy-rate-in-india.html](http://www.indiaonlinepages.com/population/literacy-rate-in-india.html) ). Regarding female literacy a most notable thing that came across in the 2011 census is the sharp rise in the literacy of females over males. Kerala is highest with 92.0 %, Mizoram is with 89.4% next to Kerala and Lakshadweep is with 88.2% in women literacy rate where as Bihar and Rajasthan have very poor women literacy rate 53.3% and 52.7% respectively.

Table-1  
Literacy Rate in India (census-2011)

Rank	State	Literacy rate 2011 census in %	Literacy rate male in % (2011 census)	Literacy rate female in % (2011 census)
1.	Andaman&Nicobar Islands	86.3%	90.1%	81.8%
2.	Andhra Pradesh	67.7%	75.6%	59.7%
3.	Arunachal Pradesh	67.0%	73.7%	59.6%
4.	Assam	73.2	78.8%	67.3%
5.	Bihar	63.8%	73.5%	53.3%
6.	Chandigarh	86.4%	90.5%	81.4%
7.	Chhattisgarh	71.0%	81.5%	60.6%
8.	Dadra & Nagar Haveli	77.7%	86.5%	65.9%
9.	Daman & Diu	87.1%	91.5%	79.6%
10.	Delhi	86.3%	91.0%	80.9%
11.	Goa	87.4%	92.8%	81.8%
12.	Gujarat	79.3%	87.2%	70.7%
13.	Haryana	76.6%	85.4%	66.8%
14.	Himachal Pradesh	83.8%	90.8%	76.6%
15.	Jammu & Kashmir	68.7%	78.3%	58.0%
16.	Jharkhand	67.6%	78.5%	56.2%
17.	Karnataka	75.6%	82.8%	68.1%
18.	Kerala	93.9%	96.0%	92.0%
19.	Lakshadweep	92.3%	96.1%	88.2%
20.	Madhya Pradesh	70.6%	80.5%	60.0%
21.	Maharashtra	82.9%	89.8%	75.5%
22.	Manipur	79.8%	86.5%	73.2%
23.	Meghalaya	75.5%	77.2%	73.8%
24.	Mizoram	91.6	93.7%	89.4%
25.	Nagaland	80.1%	83.3%	76.7%
26.	Orissa	73.5%	82.4%	64.4%
27.	Puducherry	86.5%	92.1%	81.2%
28.	Punjab	76.7%	81.5%	71.3%

29.	Rajasthan	67.1%	80.5%	52.7%
30.	Sikkim	82.2%	87.3%	76.4%
31.	TamilNadu	80.3%	86.8%	73.9%
32.	Tripura	87.8%	92.2%	83.1%
33.	Uttar Pradesh	69.7%	79.2%	59.3%
34.	Uttarakhand	79.6%	88.3%	70.7%
35.	West Bengal	77.1%	82.7%	71.2%
	Whole India	74.4%	82.14%	65.46%

Source:www.mapofindia.com/census2011/literacy-rate-html.

The Sarva Siksha Abhiyaan (SSA) with targeted interventions for girls' education has led to an increase in the Gender Parity Index (GPI) in primary (0.94) as well as upper primary (0.92) education. Enrolment of girls at primary level increased by 8.67% (86.91% in 2001-02 to 104.7% in 2009-10) and at upper primary level by 13% (52.1% in 2001-02 to 65.1% in 2004-05) (planningcommission.nic.in/aboutus/.../str\_womagency\_childrenrights.pd....)

### 1.1.3 Infant Mortality Rate (IMR) of Female in India:

United Nations Department of Economic and Social affairs (UNDESA) data for 150 countries over 40 years showed that India and China are the only two countries in the world where female infant mortality is higher than male infant mortality in the 2000s. India was found to be the most dangerous place in the world for a baby girl. The data revealed that an Indian girl child aged 1-5 years is 75% more likely to die than an Indian boy, making this the worst gender differential in child mortality for any country in the world. As per the report there are 76 male infant deaths for every 100 female infant deaths in China compared with 122 male infant deaths for every 100 female infant deaths in the developing world as a whole. India was observed to have a better infant mortality sex ratio than China, with 97 male infant deaths for every 100 female. However the figure was still not in tune with the global trend, or with its neighbours Sri Lanka (125) or Pakistan (120). ([www.jagranjosh.com/.../undesa-datavealed-higher-female-infant](http://www.jagranjosh.com/.../undesa-datavealed-higher-female-infant))

In India the Infant Mortality Rate (IMR) in 2008 per 1000 live births was 53 and in 2009 it was 50. The male infant mortality rate per 1000 live births was 52 where as the female mortality rate was 55. In rural areas the total mortality rate was 58 per 1000 live births. Male infant mortality rate was 57 where as female infant mortality rate was 60. In urban areas of India the total infant mortality rate was 36 per 1000 live births. The male infant mortality rate was 34 whereas the female infant mortality rate was 38 per 1000 live births. (source: India, Registrar general, Vital Statistics Division (2009) Sample Registration System Bulletin October 2008, New Delhi. p5). [www.nipccd.nic.in/reports/ehndbk10-pdf](http://www.nipccd.nic.in/reports/ehndbk10-pdf). Total Fertility Rate (TFR) in India is 2.5 as per Sample Registration Survey (SRS) 2010. Odisha and Uttarakhand with the TFR of 2.3 each are at one extreme and Uttar Pradesh and Bihar with 3.6 and 3.7 respectively are at the other extreme ( Office of Registrar General, India, Ministry of Home Affairs , Govt. of India, Press release dated 16.07.2012 ) [censusindia.gov.in/](http://censusindia.gov.in/)

### 1.1.4 Maternal Mortality Rate (MMR) in India :

India continues to contribute about a quarter of all global maternal deaths. WHO (World Health Organization) defines Maternal Mortality as the death of a women during pregnancy or in the first 42 days after the birth of the child due to causes directly or indirectly linked with pregnancy ([www.unicef.org/india/health.html](http://www.unicef.org/india/health.html)) Maternal Mortality Rate (MMR) of India is 212 per one lakh live births, where as the country's MDG (Millennium Development Goal) in this respect is 109 per one lakh live births by 2015. One maternal death is being reported every 10 minutes in the country now. India has recorded around 57,000 maternal deaths in 2010, which translate into a whopping six every hour and one every 10 minutes what UN data says in this regard. ( [Zeenews.india.com/.../a-maternal-death-every-10-mins-in-india-un-1...](http://Zeenews.india.com/.../a-maternal-death-every-10-mins-in-india-un-1...) ) .

India has reduced MMR (Maternal Mortality Rate) significantly from 437 per one lakh live births in 1999 to 212 now. As stated by Frederiva Meijer, India's representative for United Nations Population Fund "India is moving well on MMR. We have made progress in this regard. The MMR recorded a 38 per cent decline in maternal deaths between 1999 and 2009. There has been progress but we are not there just yet. The government needs to ensure the availability of auxiliary Nurses and Midwives closer to the homes of women who are delivering". ([Zeenews.india.com/.../a-maternal-death-every-10-mins-in-india-un-1...](http://Zeenews.india.com/.../a-maternal-death-every-10-mins-in-india-un-1...))

As per the latest result of Sample Registration Survey (SRS) 2007-2009 the highest decline in MMR has been observed in Assam (90) points followed by Uttar Pradesh / Uttarakhand (81 points), Rajasthan (70 points). ([articles.timesofindia.indiatimes.com>collections](http://articles.timesofindia.indiatimes.com>collections))

## 1.2 Status of Women in Odisha:

Odisha state with a geographical area of 4.75% of the country and comprising 36.7 million people of India's 3.57% population is a low income state. The state has 30 districts and is rich in natural resources, inland water with 11 major rivers Mahanadi being the major one, many big and small water bodies with the famous Chilka lake, a big stretch of coastal line with a good potential for fisheries, a good forest cover of about 30% surface area and endowed with rich mineral deposits of coal, Iron, Bauxite, Lime stone, Dolomite. ([Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.pdf](http://Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.pdf))

### 1.2.1 Sex Ratio in Odisha:

According to national census report 2011 the population of Odisha is 41,947,358 out of which 21,201,678 male and 20,745,680 female. The population of Odisha forms 3.47 percent of India's population in 2011. The decadal population growth of Odisha in 2001 - 2011 is 13.97 per cent which is less than the decadal population growth in 1991 - 2001 (15.94 %) and the national decadal population growth rate (17.64 %). The density of population per sq km in Odisha is 269 which is less than the national population density (per sq km 382). The population of age group 0-6 years in Odisha is 5,035,650 (male 2,603,208 and

female 2,432,442) against the national population of this age group 15,87,89,287 (male 8,29,52,135 and female 7,58,37,152). Total population of age seven years and above in Odisha is 36,911,708 (male 18,598,470 and female 18,313,238) where the national population of this age group is 1,051,404,135. (tnpsc.worldpress.com/2011.../2011-census-of-india-india-2011-census...) The sex ratio in Odisha declined drastically from 1086 in 1921 to 972 in 2001. However it has improved marginally to 978 whereas the national sex ratio is 940 females per 1000 males as per 2011 census data. In the age group 0-6 years there are 934 females per 1000 males and in age group 7 and above there are 985 females per 1000 males. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march.../40-46.pdf...)

The decline in Child Sex Ratio (CSR) is the main cause of concern as it continues to decline consistently from 967 in 1991 census to 950 in 2001 census to even lower 934 as per the 2011 census. The districts with the lowest CSR in the 2011 census data are Nayagarh (851), Dhenkanal (870), Anugul(884), and Ganjam (899). There is a set of three adjoining districts Ganjam, Nayagarh and Boudh where the CSR (urban) are below 860 (2001 census) a figure comparable to female to male ratio (FMR) in some of the districts of Haryana and western UP. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march.../40-46.pdf)

### 1.2.2 Infant Mortality Rate (IMR) in Odisha:

The Infant Mortality Rate (IMR) for females has remained lower than males throughout the last two decades. Overall the IMR of Odisha is 65 while that of all India is 50. Female IMR (FIMR) in the state remaining one of the highest in India being 66 females per 1000 live births, with the national figure (India) standing at 52. Rural IFMR is 68 in comparison to 55 of India. The urban IFMR in Odisha is 46 where as in India is 34. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march.../40-46.pdf)

### 1.2.3 Maternal Mortality Rate (MMR) in Odisha:

The maternal Mortality Rate in Odisha is 303 which is much higher than India 254 (SRS, 2009). The NFHS3 (National Family Health Survey) survey reveals that 62.7% of the ever married women in the age group of 15 to 49 years have anemia which is one of the main causes of maternal mortality besides having low Body Mass Index (BMI). The National Rural Health Mission (NRHM) is working to achieve the goal of reducing the rate of MMR in Odisha. The Janani Suraksha Yojana (JSY) under the National Rural Health Mission (NRHM, 2005) has been introduced to decrease MMR and IMR and increase institutional deliveries. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march.../40-46.pdf)

### 1.2.4 Maternal Health in Odisha:

There is some improvement in the health provision for women in Odisha. Antenatal care has been increased from 65% in NFHS1 to 87% in NFHS3. Institutional deliveries remain low though there has been an increase from 14% (NFHS1) to 39% (NFHS3). In rural Odisha 39.7% women marry in below 18 years as compared to the 24.3% in urban areas. 52.1% girls married below 18 years who took less than 5 years of education and the percentage of married girls below 18 years who completed 5-9 years of education 29.8% and those with 10 years of literacy it fell to 9.3%. It indicates that education plays an important role in reducing child marriage. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march.../40-46.pdf)

Total Fertility Rate (TFR) in Odisha is 2.3 where the National TFR is 2.5. In Odisha the percentage of mother receiving 3 or more ANC's (Ante-Natal Care) is 76.0%. Jharsuguda, Mayurbhanj, Jagatsinghpur, Cuttack, Ganjam, Kandhamal and Nuapada have reported 25% & above coverage of ANC. Within the age of 15-49 married women in Balasore district the Contraceptive Prevalence Rate (CPR) is 70%. More than 85% of total births have taken place in Govt. institutions in Madhya Pradesh and Odisha. 61.6% mothers in Odisha availing financial assistance under JSY (Janani Suraksha Yojana). 74.5% mothers receiving post natal care within 48 hours of delivery. 74.9% new-born baby checked up within 24 hours of birth in Odisha (Office of the registrar General, India, Ministry of Home Affairs, Govt. of India, Press release, Dated 16.07.2012). (tnpsc.worldpress.com/2011.../2011-census-of-india-india-2011-census....)

### 1.2.5 Nutritional status of women in Odisha:

Nutritional status of women in Odisha as indicated in NFHS-3 survey shows that about 41.4 percent of women in the state have Body Mass Index (BMI) below 18.5 indicating high prevalence of severe malnutrition among children, mothers and old and indigent people is also a matter of serious concern in the state. 61.2% women suffer from anaemia as against the National average of 69.5%, which implies that they suffer from chronic energy deficiency. Indirectly the cropping pattern in the state is also responsible for low calorie intake of women (Draft Annual Report 2011-12, Volume-1, and Govt. of Odisha). www.odisha.gov.in/P&C/...12/Annual\_Plan-2011-12-vol-1.pdf

### 1.2.6 Literacy and Education of Women in Odisha:

Literacy rate in Odisha has seen upward trend and is 73.45% as per 2011 population census in comparison to the 2001 census report of Odisha. The literacy rate of Odisha is less than the literacy rate of India (74.04%). The percentage of male literacy

is 82.40 and female literacy is 64.36% whereas the national male and female literacy rate is 82.14% and 65.46% respectively. In 2001, literacy rate in Odisha stood at 63.08% of which male and female were 71.28% and 50.51% literate respectively. In actual numbers, total literates in Odisha stands at 27,112,376 of which males were 15,326,036 and females were 11,786,340. The literacy gap in Odisha as per 2011 census 18.04% more than national literacy gap 16.68 percent. Khordha district has the highest literacy rate 87.51%. next to it Jagatsinghpur 87.13% at the one end and the literacy rate of Koraput 49.87%, Malkangiri 49.49% and Nabrangpur (lowest) 48.20% at the other end. The district of Khordha has the highest women literacy rate 82.06% and Nabrangpur has the lowest women literacy rate 37.22% .(updateox.com/india/district-wise-male-female-literacy-rate-in-india-2011-census.)

In the state, the establishment of the First Girls High School by commissioner of Cuttack Mr. Ravenshaw in 1906 and the efforts of Reba Roy and Rani of Khalikote in spreading female education in the beginning of the 20<sup>th</sup> century indicate the emerging social awareness on the need for literacy among women. Female literacy in Odisha has been lower than male and has consistently been below the Indian level. The gender gap also remaining at a high 185 (male 82.40% and female 64.36%, 2011 census) an indication of gender bias. Women have fared better in literacy because of the implementation of Sarva Siksha Abhiyan (SSA). (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

The Annual Health Survey 2010-11 reports on Odisha, the female children (6-17 years age) attending school 81.7%. The rural percentage is 80.5% where as the urban percentage is 88.8%. The female children (6-17 years age) attended before /drop outs total 15.0%, in rural 15.8% and in urban areas it is 9.8%. (censusindia.gov.)

Table-2

Districtwise Literacy Rate in Odisha, Census- 2011

Districts	Persons	Males	Females	Literacy%	Male%	Female%
Total	27112376	15326036	11786340	73.45%	82.40%	64.36%
Bargarh	994056	563095	430961	75.16%	84.28%	65.84%
Jharsuguda	405652	228715	176937	78.36%	86.27%	70.05%
Sambalpur	716410	401084	315326	76.91%	85.17%	68.47%
Debagarh	199877	113907	85970	73.07%	82.62%	63.36%
Sundargarh	1357840	761538	596302	74.13%	82.13%	65.93%
Kendujhar	1069023	616025	452998	69.00%	79.22%	58.70%
Mayurbhanj	1392207	809654	582553	63.98%	74.92%	53.18%
Baleswar	1647895	918407	729488	80.66%	88.06%	72.95%
Bhadrakh	1106962	601565	505397	83.25%	89.92%	76.49%
Kendrapara	1105385	589684	515701	85.93%	92.45%	79.51%
Jagatsinghpur	9000104	488401	411703	87.13%	93.20%	80.88%
Cuttack	1993561	1093224	900337	84.20%	90.51%	77.64%
Jajpur	1302292	714677	587615	80.44%	87.36%	73.37%
Dhenkanal	841988	471681	370307	79.41%	87.08%	71.40%
Anugul	889122	502837	386285	78.96%	87.06%	70.44%
Nayagarh	681522	387632	293890	79.13%	86.63%	71.08%
Khordha	1771198	972327	798871	87.51%	92.55%	82.06%
Puri	1309170	716143	593027	85.37%	91.84%	78.67%
Ganjam	2244408	1283157	961251	71.88%	81.85%	61.84%
Gajapati	267697	157330	110367	54.29%	65.58%	43.59%
Kandhamal	407383	239270	168113	65.12%	78.41%	52.46%
Boudh	276122	161440	114682	72.51%	84.49%	60.44%
Districts	Persons	Males	Females	Literacy%	Male%	Female%
Subarnapur	428333	248893	179440	74.42%	84.78%	63.63%
Balangir	944254	559065	385189	65.50%	77.08%	53.77%
Nuapada	303559	184049	119510	58.20%	71.55%	45.21%
Kalahandi	818396	495187	323209	60.22%	73.34%	47.27%
Rayagada	417632	248859	168773	50.88%	62.61%	39.87%
Nabrangpur	490161	298693	91468	48.20%	59.45%	37.22%
Koraput	579203	348447	230756	49.87%	61.29%	38.92%
Malkangiri	250964	151050	99914	49.49%	60.29%	38.95%

(Source: updateox.com/india/district-wise-male-female-literacy-rate-in-india-2011-census.)

### 1.2.7 Participation of Women in Work and Employment in Odisha:

In agriculture and many other unorganized sector such as Mining, beedi manufacturing, NTFP collection and construction work there are more than 75% of women engaged. In the unorganized sector where the majority women workers are concentrated,

no occupational safety and health safe guards are provided. The female force constituting one third of the rural workers in India “face serious problems and constraints related to work such as lack of continuity, insecurity, wage discrimination, unhealthy job relationship, absence of medical and accident care”. The tragic paradox of women’s labour in the organized sector is their highly visible presence as contract labour within the public sector mines, the most patriarchal of work. Labourers by the thousands employed in head loading, stone breaking, cleaning and other forms of daily wage labour where they are entirely at the mercy of petty contractors and have absolutely no work safety or security. In the unorganized sector they are forced to work beyond work hours, even in advanced stage of pregnancy, have no leave or Crech facilities, and are always under threat of being thrown out. In some of the quarries in Odisha, women are forced to work at night and are sexually abused and therefore, found not to be respectable for marriage. (orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

The percentage of women in the organized sector has increased from 4.1% in 1970 to 15.4% by the end of 2007. In the high echelons of administration women constitute less than 0.14%, in comparison there has been a decline in private sector employment for women from 18.7% in 2000 to 10.8% in 2007. The employment registration indicated that only 0.35 lakh were women job seekers compared to 1.47 lakh men. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

In Odisha besides carrying out domestic works such as cooking and looking after the children women also carrying out unpaid activities such as kitchen gardening, work in household poultry, collecting fire wood and cow dung, husking paddy, grinding food grain and collecting water from at least 2 to 5 kilometers distance. Unfortunately under the age of five, girl children at the cost of their education and well being, engage in near equal domestic activities as below 15 years and adults. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

### 1.2.8 Trafficking, Migration and Displacement of Women in Odisha:

About 50% of migrants from Odisha are from the tribal districts of women. They go to Hyderabad or Raipur or within the state to Bhubaneswar, to work in brick kilns where they are paid Rs. 80 per 1000 bricks made, which normally takes 12 to 15 hours and involves physical labour. They migrate as access to PDS (Public Distribution System) is low, Food For Work (FFW) is inadequate to ensure food security, Frequent droughts make agricultural productivity low and availability of work throughout the year is low. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

As the state joins in the race for globalization there are the adverse effects of displacement, migration and trafficking experienced by women which need urgent attention. Some are forced to move while in the case of others little work and low literacy combine to women moving out to new postures which unfortunately are unsafe. Exploitation by agents in Delhi, forces them to leave their jobs as domestic workers to join other women in sex work. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

### 1.2.9 Women in Politics in Odisha:

Women joining in politics beginning with the freedom movement to 2009 where elections reflected the sorry status of women in politics in Odisha it has been a struggle. No women from Odisha are represented in the Lok Sabha. In Assembly there are only 7 women. Women’s inclusion in parties ranged from 8 in BJD (Biju Janata Dal) to 15 in Congress but their own strength is emerging as 37 women stood as independents in the last national elections. Due to exclusion from political decision making their impact on the state would remain limited. So, more women are to be included in the political process. The state has already implemented 50% of seat reservation in Panchayats for women. (Orissa.gov.in/e-magazine/orissareview/2012/feb-march/.../40-46.)

## 1.3 Status of Rural and Tribal Women in Odisha:

### 1.3.1 Status of Rural Women in Odisha:

Of the total population of Odisha state, around 83.32% live in the villages of rural areas in comparison to the urban population 16.68 percent. In actual numbers, males and females are 17,584,859 and 17,366,375 respectively in comparison to the male and female population in urban Odisha 3,616,819 and 3,379,305 respectively. Total population of rural areas of Odisha state is 34,951,234 and urban areas of the state is 6,996,124 in comparison to the national rural population 74,26,17,747+ and urban population 28,61,19,689+.. The population growth rate recorded for this decade (2001-2011) was 11.71% in comparison to the urban areas 26.80 percent. Female sex ratio in rural regions of Odisha per 1000 males 988 females where as in urban it is 934 while same for the child in rural Odisha (0-60 age) is 939 girls per 1000 boys and 909 girls per 1000 boys in urban Odisha. In Odisha 4,335,012 children (0-6 age) live in rural areas. Child population forms 12.40% of total rural population. The literacy rate in rural areas for males and female is 80.41% and 61.10% where as it is 91.83 percent and 80.70 percent for boys and girls of urban Odisha respectively. Average literacy rate in Odisha for rural areas is 70.78% where the total literates in rural areas are 21,669,993. [www.census2011.co.in>states](http://www.census2011.co.in>states)

According to the report given by Annual Health Survey 2010-11, Fact sheet, Odisha, the Sex ratio at birth in Odisha is 905 females per 1000 males. Nabrangpur has the highest sex ratio at birth per 1000 male 951 female, Jagatsinghpur 970 females (in rural area), Nayagarh 832 females (total) and 828 females (in rural), Sex ratio for all ages in rural areas of Odisha is 1003 females per 1000 males. In Kendrapara it is highest (in total) 1101 females and (in rural) 1104 females, Jharsuguda lowest (in total) 936 females and the lowest ratio in Jharsuguda & Nayagarh (in rural) 958 females. (Annual Health Survey 2010-11, Fact sheet, Odisha).(www.censusindia.gov.in/).

As per 2011 census the total literacy rate in Odisha is 73.45%. In rural areas it is 74.0%. Male literacy in Odisha is 82.40% and rural male literacy is 83.1%. female literacy in Odisha is 64.36% and rural female literacy is 65.0%.Kendraparea has the highest female literacy 84.9% and Malkangiri has the lowest female literacy 39.8%. Jagatsinghpur district has the highest rural female literacy 80.9% and Koraput has the lowest rural female literacy 36.3%.Currently Girls (6-17 years age in %) attending school in Odisha 81.7% and in rural areas it is 80.5%.Rural female attended before/dropout rate (age 6-17years %) is 15.8%.(Annual Health Survey ,2010-11,Fact Sheet, Odisha).(www.censusindia.gov.in/).

The Total Fertility Rate (TFR) in rural areas of Odisha is 2.4%. The rural married pregnant women aged 14 to 49 years registered for Ante Natal Care (ANC) is 68.5%. Mothers who received any Antenatal check-up in rural areas is 60.9% and rural women institutional delivery is 69.2% where the percentage of safe delivery in rural areas is 73.3% The percentage of mothers who received post-natal care check-up within 1 week of delivery in rural areas is 76.9% . 78.2% rural women have the awareness of HIV/AIDS. The Crude Death Rate of female in Odisha is 7.7% and in rural areas it is 8.1%. The Infant Mortality Rate (IMR) of female in Odisha is 66 percent and In rural it is 68 percent. The Neo-natal Mortality Rate (NMR) of female in Odisha is 40 percent and it is 42 percent in rural Odisha. The Post-natal Mortality Rate (PMR) in Odisha is 22 percent and it is 23 percent in Rural Odisha.(Annual Health Survey, 2010-11, Fact Sheet, Odisha).(www.censusindia.gov.in/).

female children aged 5-15 years (3.8%) work in Odisha and in rural it is 4.0%.Total work participation of female in the age group 25 years and above is 24.6% and in rural areas it is 26.0%.As whole 33.47% women in rural areas and 95% of the female workers are concentrated in rural areas (Annual Health Survey 2010-11, Fact Sheet, Odisha). (www.censusindia.gov.in/).

### 1.3.2 Status of Scheduled tribe women in Odisha:

According to Article 342 of the Constitution, the Scheduled Tribes are the tribes or tribal communities or part of or groups within these tribes and tribal communities which have been declared as such by the president through a public notification. The criteria followed for specification of a community, as scheduled tribe are indicators of primitive traits, distinctive culture, geographical isolation, shyness of contact with the community at large, and backwardness. At present, 533 tribes in India have been notified under Article 342 of the Constitution with the largest number of 62 tribes belonging to the state of Odisha.

According to the 2011 census, the scheduled tribe population of India is 10.42 crore (104,281,034), constitutes 8.6% of total population of India which was 8.43 crore (84,326,240) in 2001 census (8.2 percent of the total population of the country).There has been an increase of 0.4% during the last decade. The population of Scheduled Tribes has been on the increase since 1961.The female scheduled tribe population in India is 5.18 crore (5,18,71,211) where the male scheduled tribe population is 5.24 crore (5,24,09,823) according to 2011 census of India. More than half the Scheduled Tribe population is concentrated in the states of Madhya Pradesh 14.7% (15,316,784), Chhattisgarh 7.5%(7,822,902), Maharashtra 10.1% (10,510,213), Odisha 9.2% (9,590,756), Jharkhand 8.3% (8,645,042) & Gujarat 8.6% (8,917,174) (% of ST population of states to the STs population of country) Majority of the STs population live in rural areas and their population is 11.3 percent (93,819,162) in comparison to the total rural population(833,463,448) of the country.(All India population and total ST population-Male and Female census 2011,www.tribal.gov.in/.../).

The Scheduled Tribe (ST) population of the state of Odisha is 9,590,756 which is 22.8% to the total population of the state and 9.2% to the total STs Population of the country as per 2011 census. It was 22.1 percent(8,145,081) proportionate to the total population of odisha in 2001 census.Total number of STs male population is 4,727,732 where the total number of female population is 4,863,024 which is more than the STs male population of the state. The highest STs population is recorded in Mayarubhang district is 1,479,576 out of which STs female population is 749,089) where as it is lowest in Puri district 6129 in census 2011. The female ST population of the state is 8.5% to the total population of the state in census 2011 which was 8.1% in census 2001.The decadal growth of ST population in Odisha is 17.7% in census 2011 which is less than the decadal growth of ST population in India (23.7%).The highest decadal change in ST population is seen in Kendrapada district (39.0%) where as it is lowest in Jagatsinghpur district (-9.0%) in census 2011. There 62 tribes including 13 Primitive Tribal Groups (PTG) live in Odisha.The districts more than 50% ST population to their respective total population are Mayurabhanj(58.7%), Malkangiri(57.8%),Rayagada(56.0%),Nabarangapur(55.8%),Kandhamal(53.6%), Gajapati(54.3%),Sundargarh(50.7%),Koraput(50.6%)(www.tribal.gov.in/.../). Among 62 tribals, the major groups are Khond, Gond, Santal, Kolha, Munda, Saora, Shabar and Bhattada, Bhumija, Bhuiya, Oraon, Paroja and Kisan. Khond is the most populous Primitive Tribal Group followed by Gond, Santhal Kolha, Munda, Saora, Sabar and Bhattada.

([dfp.nic.in/Bhubaneswar/census.aspx](http://dfp.nic.in/Bhubaneswar/census.aspx)) Majority of STs live in hilly and forest areas, which are mostly inaccessible and isolated. 62 STs in Odisha speak as many as 74 dialects and their cultural heritage is rich and varied. Their economy is largely subsistence oriented and non-specialized.

As per the population census 2011, the overall sex ratio of the STs population in Odisha is 1,029 (1,003 in census 2001) in comparison to the national STs sex ratio 978. It shows the preponderance of the females and is higher than the national average (990) for all STs in census 2011. As per census 2001 the STs sex ratio in Odisha was 1,003 in comparison to the national STs sex ratio 978 per 1000 male. In census 2011 Goa has the highest STs sex ratio (1,046) where as J&K has the lowest STs sex ratio (924). (Statewise ST population & decadal change by residence 2011, [www.tribal.gov.in/...](http://www.tribal.gov.in/)). Rayagada district has the highest sex ratio (1,092) where Jagatsinghpur has seen lowest sex ratio (860) in census 2011. The decadal growth rate of STs population in Odisha is 17.7% in 2001-2011 census in comparison to the national STs decadal growth rate (23.7%). Highest decadal STs population growth rate (2001-2011) is in Kendrapara district (39.0) where as it is lowest in Jagatsinghpur district (-9.0) (primary census abstract-Data High lights [censusindia.gov.in/census...](http://censusindia.gov.in/census...)). The sex ratio of STs in the state is 1029 females per 1000 males in comparison to the SCs sex ratio 987. The STs children (0-6 years) constitute 15.9% of total STs population of the state. The child sex ratio of STs in Odisha is 980 girls per 1000 boys in comparison to the average child sex ratio of the state 941 and It is best one in national level is in Chhatisgarh 993 girls per 1000 boys as per census 2011. The sex ratio of STs in Odisha has increased from 979 in 2001 to 980 in 2011. (TOI, Dec. -19, 2013, Bhubaneswar).

The overall literacy rate of the STs in the state has increased from 22.3 percent in 1991 to 37.4 percent in 2001 and 43.96 percent (4,215,630) in census 2011. In spite of this improvement, the literacy rate among the tribals, is considerably below the national average 74.4%. The number of Male literates are 2,522,307 while the number of female literates 1,693,323 in census 2011 which is less than the national number of STs female literates 21,568,511. Mayurabhanj has the highest female literates (261,736) next to it Sundargarh (261,686) and Keonjhar (142,530) (primary census abstract data for scheduled tribes (ST) India & state/uts-district level) ([www.censusindia.gov.in/2011census/...](http://www.censusindia.gov.in/2011census/...)). The Gross Enrollment Ratio (GER) of STs girls from class-I to viii (age 6-13 years) in rural Odisha according to GOI, selected Educational Statistics, 2007-08 is 103.09 percent which is little bit less than the national rural ST girls Gross Enrolment Ratio (GER) 108.94 percent.

The Work Participation Rate (WPR) of the ST population of Odisha is 49.7% where as it is 41.6% in SCs and state's average Work Participation Rate (WPR) of India is 41.8%. The Work Participation Rate (WPR) of the country is increasing. The Work Participation Rate (WPR) of STs women in our country is 43.55 where as it is 25.5% in the national general population in census 2011. More number of STs women participate in the work force than women in any other category of the population in Odisha. (TOI, Dec. 19 2013). The tribal women have a peculiar position and status in the tribal society. In some tribal societies, matrilineal and matriarchal systems exist. Most of the tribal organizations have clearly defined areas of work among the males and females. Although the work domain assigned to women is important in terms of sustenance of the family, yet viewed from the value rating of work, they are relatively low in the hierarchy of work domain. Their migration from Odisha to another city is a matter of concern. According to the report, Survey of the sampled tribal families in the study states (2009) 66 percent (age 19-25) migrate to other cities for their livelihood. More than three-fourths of the Chhattisgarh, Jharkhand and Odisha states tribal women are working as domestic servants. They migrate to different cities like Delhi (8.23%), Mumbai (1.34%), Kolkata (2.50%), Pune (3.13%), Goa (3.31%). Most of them are physically/sexually exploited by the land lords or contractors ([www.planningcommission.nic.in/report/sereports/ser/ser\\_mig.pdf](http://www.planningcommission.nic.in/report/sereports/ser/ser_mig.pdf)).

The census 2001 data on marital status show that 'never married' persons with a proportion of 50.9 percent exceeds the 'married' persons (43.2%), 'widowed' persons constitute 5.5 percent while half percent are 'divorced and separated'. Marriage of girls and boys below the legal age of 18 years and 21 years respectively are rare among the tribes of Odisha. The proportion of married girls below 18 years (1.6 %) which is below the all STs national average (2.1%).

According to a report given by Padma Charan Behera (2011) on the basis of a case study on the Paharia's one of the Primitive Tribal Groups (PTG) in Nuapada district, the Paharia's life expectancy of male and female are 58 and 55 respectively when it is 62 for average Odishan. Under (5 years) mortality rate is as high as 128 compared to district's 64 (Nuapada). Rate of early marriage is still rampant. For the Kalahandi-Balangir -Koraput (KBK) districts it is 60 percent. Deliveries are made at the home 90 percent. Paharia's are still unaware of Government- funded Janani Suraksha Yojana (JSY). Awareness about HIV/AIDS among them is almost zero. Per 1000 Paharia males there are 1024 females. Girl student's enrolment is 50 percent. ([www.orissa.gov.in/e-magazine/orissareview/2012may/engpdf/60-65.pdf](http://www.orissa.gov.in/e-magazine/orissareview/2012may/engpdf/60-65.pdf))

Most of the tribal women are under the shackle of mal-nutrition, anemia and different types of ailment. They are ignorant of Ante-Natal Care (ANC) check-up, Post-Natal Care (PNC) check-up and other safety health measures. Not only they but also the total tribal community of the state educationally, socially and economically far backward than other social groups. Especially in the tribal dominated districts of Kalahandi, Balangir and Koraput (KBK) there are repeated cases of sale of child, bonded labour, starvation, death, frequent outbreak of diseases, mass drop outs, migration etc. (Tripathy, 1989).

Women atrocities, rape, sexual exploitation in work place are regular incidents for ST women in Odisha. According to the Times Of India report on 9<sup>th</sup> April 2011 two tribal women, one gang raped and the other widowed, all allegedly by police, have moved the high court, seeking action against the culprits and compensation from the Govt. (21 year gang-rape victim Aarti Majhi, is from Jading village of Gajapati District while 26 year Simkari Huika from Lachhamani of Koraput and incident took place on Feb. 2010). (TOI, 9<sup>TH</sup> April 2011).

Education for Sustainable Development (ESD):

Two pedagogical interpretations of ESD can be distinguished: 1) ESD as a means to transfer the 'appropriate' sets of knowledge, attitudes, values and behaviour; and 2) ESD as a means to develop people's capacities and opportunities to engage with sustainability issues so that they themselves can determine alternative ways of living. Where the emphasis is placed is likely to depend on the traditions and specificities regarding issues like governance and participation in a particular region or country. Although there is no hard evidence to support this claim, there is anecdotal evidence to suggest that there is more emphasis today on the ESD than there was at the beginning of the Decade. In part, this shift could be due to increased realization of the complex nature of SD and the recognition that there is no 'one size fits all' for all regions and local contexts regarding it. The emphasis on lifelong learning and capacity-building that we find in recent ESD documents such as UNEP's Mainstreaming Environment and Sustainability in African Universities Partnership report<sup>44</sup> and ENSI's workshop report Progress and Possibilities for the UN Decade of Education for Sustainable Development (DESD). Many of the responding countries emphasize that ESD is values-driven and seeks to empower and enable people to participate in society and help them understand the complexity of finding a balance approach that integrates socio-economic, ecological, cultural and ethical factors that jointly determine the sustainability of development. Key SD issues such as poverty alleviation, climate change or gender equality, are generally not mentioned in the definitions but instead the focus tends to be on the types of learning that can engage, enable and empower people. This is not to suggest that these SD issues are not important or are not identified but rather that the ESD is considered crucial. Some key words frequently used in ESD definitions.

- Creation of awareness
- Local and global vision
- Responsibility (learn to be responsible)
- Learning to change
- Participation
- Lifelong learning
- Critical thinking
- Systemic approach and understanding complexity
- Decision-making
- Interdisciplinary
- Problem-solving
- Satisfying the needs of the present without Compromising future generations
- Literacy skills
- Pre & Neo-natal Awareness
- Child Care Awareness
- Family Health Awareness
- Vocational Awareness
- Economic Enhancement (Productivity )
- Women Empowerment
- Environmental Issues and Awareness

The present study emphasizes the following skills which are to be evaluated in case of educated women.

#### 1.4.1 Literacy skills:

The Gender Achievement and Prospects in Education Report (GAP 2005) quotes "illiteracy is a catastrophe for any child but particularly devastating for girls. Girls who are denied education are more vulnerable to poverty, hunger, violence, abuse, exploitation, trafficking, HIV/AIDS and other diseases and material mortality. If they become mothers, there is a greater chance that they will bequeath illiteracy and poverty to the next generation".

There is a growing sense of momentum and recognition globally around literacy in general and women's literacy in particular. The global commitment to overcome illiteracy or reducing the imbalance between the literates and illiterates is clearly endorsed by the UN literacy decade (2003-2012) and by the Report on the World Social Situation (2005). Literacy is both an indicator and an instrument of development and it's attainment is a major factor behind accumulation of human capital. Education

in general and mass literacy in particular, is a key contributor to Human Resource Development and is thus basic to any programme of social economic progress. Literacy is the most essential prerequisite for individual empowerment. (Yadav Pramila, 2009).

The United Nations Educational Scientific and Cultural Organization (UNESCO) have defined literacy as the “ability to identify, understand, interpret, create, communicate, compute and use printed and written materials associated with varying contexts. Literacy involves a continuum of learning in enabling individuals to achieve their goals, to develop their knowledge and potential, and to participate fully in their community and wider society”.

The National Literacy Mission defines literacy as acquiring the skills of reading, writing, and arithmetic and the ability to apply them to one’s day-to-day life. The achievement of functional literacy implies:

1. Self-reliance in 3Rs,
2. Awareness of the causes of deprivation and the ability to move towards amelioration of their condition by participating in the process of development.
3. Acquiring skills to improve economic status and general wellbeing, and imbibing values such as national integration, conservation of environment, women’s equality, observance of small family norms. (Wikipedia, the free encyclopedia)

#### 1.4.2 Pre & Neo-natal Awareness:

Care during pre-natal stage and neo-natal stage of the child and mother is important for both of them. Mother should have sufficient knowledge and awareness on the safety measures of safe delivery, nutritional diets, medical check-up etc. in pregnancy and postpartum period. It is important to plan for a healthy birth and to develop an action plan for possible complications. Mothers should know that heavy workload of pregnant mother may contribute to preterm labour and/ or a factor in intrauterine growth restriction. Research trials in low-resource settings showed that giving the mother protein energy supplementation during pregnancy resulted in a significant reduction in Low Body Weight rate (LBW) and fetal neo-natal mortality. In addition to these a mother should have below stated knowledge and awareness for better pre-natal care of the child and herself.

- Knowledge of the number of Antenatal check-up
- Knowledge of improved nutrition in the stage of pregnancy
- Promoting iron and foliate supplementation
- Taking targeted protein-energy supplementation as appropriate
- Taking micronutrient supplements such as iodine and Vitamin A
- Prevention of anemia with good diets, iron and folate supplementation and presumptive treatment of malaria and hookworm
- Prevention and treatment of infections in pregnant condition
- Testing & receiving counseling for HIV/AIDS
- Tetanus toxoid immunization coverage for the complete period of pregnancy
- Promotion of birth planning and emergency preparedness

All new born require essential new born care to minimize the risk of illness and to maximize their growth and development. Babies can quickly change from appearing normal to being very sick .Emergency preparedness by the family , community and health care system is crucial because sick newborns need to be rapidly assessed stabilized and managed with standard emergency care protocols.

Basic needs for any new born include breathing, warmth, cleanliness, feeding, and love .Clearly good essential care of the new born will prevent many new born emergencies. For example, the umbilical cord may be the most common source of neo-natal sepsis and also of tetanus infections, and good cord care could dramatically reduce the risks of these serious conditions. Breast feeding has a significant protective effect against infections. Early breast feeding with the baby held close to the mother reduces the risk of hypothermia, as well as hypoglycemia and jaundice.

For everybody including mother is to have routine new born care to enhance normal growth and development and to minimize risk factors for complications.

- Knowledge of preventive measures to avoid infection ( clean cord care ) ( cord, eye and skin care )
- Knowledge of immunization
- Providing vitamin k 0.5 mg injection for all LBW babies
- Knowledge of how HIV is transmitted to the new born and ways to reduce their risk.
- Knowledge on the issues surrounding HIV and breast feeding so that they can make an informed decision.

- Knowledge of early initiation of breast feeding ( i.e. ,within the first hour )
- Knowledge of promoting exclusive breast feeding for six months
- Knowledge of on the benefits of breast feeding
- Knowledge on the importance of keeping the baby warm
- Encourage the use of simple techniques for avoiding hypothermia ( i. e. , avoiding excessive bathing, wearing hats, kangaroo care )
- Knowledge on the clean delivery practices
- Knowledge on the importance of cleanliness and how this can be achieved (www.care.org/careswork/whatwedo/health/downloads/...../part4.pdf)

#### 1.4.3 Child Care Awareness:

Child care is ( characterized by ) warm , supportive interactions with adults in a safe ,healthy and stimulating environment, where early education and trusting relationships combine to support individual children's physical , emotional , social and intellectual development ( Scar 1998 : 100).

The share of children (0-6 years) in the total population has showed a decline of 2.8 points in 2011, compared to census 2001 and the decline was sharper for female children than male children in the age group 0-6 years. The overall sex ratio of the country is showing a trend of improvement, where as the child ratio is showing a decline trend . During the period 1991-2011, children sex ratio declined from 945 to 914 , where as the overall sex ratio showed an improvement from 927 to 940.(mospi.nic.in/mospi\_new/upload/children\_in\_India\_2012.pdf )

Children of today are citizens of tomorrow, which is why it is extremely important to ensure proper health care facilities as well as adequate nutritional intake for the children. It is now globally acknowledged that investment in human resource development is a pre requisite for any nation. Early childhood, that is the first six years constitute the most crucial period in life, when the foundations are laid for cognitive, social and emotional, language, physical/motor development and cumulative lifelong learning. The young child under 3 years is most vulnerable to the vicious cycles of malnutrition, disease/infection and resultant disability all of which influence the present condition of a child at micro level and the future human resource development of the nation at the macro level. So, mother who is the first care taker of the child should have maximum child care knowledge and awareness. She should have the knowledge and awareness of the immunization of the child, balanced diet of the child, safe medical check-up of different limbs/organs of the child, testing of different sense organs for their perfect actions in life, knowledge of different chronic diseases and their possible remedial measures by her and other health related issues and congenial environments of children for their better growth and development.

#### 1.4.4 Family Health Awareness:

Human capital is the stock of competencies, knowledge and personality attributes embodied in the ability to perform labour so as to produce economic value. It is an instrument of promoting comprehensive development of the nation because human capital is directly related to human development, and when there is human development, the qualitative and quantitative progress of the nation is inevitable (Haq, Mahabub 1986). The human capital is developed by health, education and quality of standard of living. The components of Human Development Index (HDI) are life expectancy index; Education index and Income index are directly related to human capital formation within the nation. So, family health awareness and education has an important role in the formation of human capital which ultimately helps to develop a nation.

Family health awareness of women can build a healthy family if she possesses health and hygiene knowledge. Proper health care of mother for all family members, her knowledge on nutrition, problems of early marriage, birth spacing, small family norms, sanitation, common diseases and their remedies, first-aid, reproduction, healthy sex life, HIV/AIDS, contraception etc. helps a lot for making a safe healthy family.

#### 1.4.5 Vocational Awareness:

Vocational awareness and education of women helps her to be self sufficient and self reliant for achieving economic empowerment. Economic empowerment of women is one of the key factors for achieving women empowerment. It is one of the components of Human Development Index (HDI) that forms human capital for the development of nation.

Vocational awareness skill of women refers to the knowledge of the employment opportunities available in different sectors, knowledge on different skills for different jobs, knowledge on different vocations and training institutions providing vocational training, knowledge on availing further training for better perfection in profession, knowledge on different policies and programmes launched by governments in central and state level for providing jobs etc.

#### 1.4.6 Economic Enhancement (Productivity):

Economic participation of women has a great role not only in family economy but also in nation's economy. But their productive works are neither recognized nor paid. Their multisided economic roles add new feathers to the economic enhancement of the family. As a house wife she teaches her child, cooks, takes care of the house, works in kitchen garden, goes market for shopping, stitches babies clothes, works in agricultural fields ,prepares his monthly budget and also saves money for future. As a working lady in organized or unorganized sector, she earns money and helps family economy. In these ways their economic participation helps to enhance the economy of the family and the nation also. Their illiteracy and lack of awareness leads them towards inaccessibility in economic opportunity, unemployment and poverty.

#### 1.4.7 Women Empowerment:

Beijing Platform for Action states emphatically that women's empowerment is 'fundamental for the achievement of equality, development and peace' (UN 1996: para.13). Women's empowerment can be understood as a process whereby women, individually and collectively, develop awareness of the existing discrimination and inequality between women and men and how it affects their lives; understand how power structures, process and relationships produce and reinforce this discrimination and inequality' and gain the self confidence, capacities and resources required to challenge gender inequalities.

Empowerment involves awareness raising, building of self confidence, expansion of choices, involvement in decision making and increased access to and control over resources. Srilata Batliwala, a well known woman activist, has defined women's empowerment as "the process by which women gain greater control over material and intellectual resources, and challenge the ideology of patriarchy and the gender based discrimination against women in all institutions and structures of society". Women's empowerment is the process by which women negotiate a more equitable distribution of power, a greater space in the critical decision making processes in the home, in the community, and in economic political life. Reddy, G.N. and N.R. Suma(1987:8) defined women empowerment as "enabling people , especially women to acquire and possess power resources, in order, for them to make decisions on their own or resist decisions that are made by others which affect them. A person may be said to be powerful when he/she has control over a greater or equal proportion of power resources in society. The extent of possession of various power resources such as, personal wealth, assets, land, skills, education, information, knowledge, social status, position held, leadership traits, capabilities for mobilization and maneuverability etc., determine the degree of decision making power".

The process of empowerment implies broader, systematic change in the way society is structured. And in that sense, empowerment is a necessary part and parcel of any genuine development effort that seeks to ultimately empower the disempowered.

At the overall level , women's empowerment aims at changing the balance of power between the sexes so as to create a more equitable distribution of power in society. However, when we examine this overall process of women's empowerment more closely, we become aware of the economic, social, political and legal dimensions of the process. Each of these dimensions is interlinked to the other, and have a bearing on each other. Examples of indicators of women empowerment are: change in women self perception from negative to positive, increase in self esteem, and self confidence, clear increase in level of women's knowledge, education, skills and over all awareness of her rights, a positive change in her capacity to take decisions independently, and the development of her ability to defend herself against the violations of her human rights.

#### 1.4.8 Environmental Issues and Awareness:

Environment is everything around us. It includes air, water, land, flora & fauna and their inter-relationship with humans. Environmental education is helpful for people to understand the intimate relationship between the quality of environment and well-being of mankind. It has a direct relationship to the sustainable rural development. Soil degeneration, depleted aquifers and deforestation can jeopardize the productivity of environment in the long run. Exploitation of environment makes the survival of rural masses difficult because their economy depends on the enrichment of these natural resources. Their environmental education is highly essential for protecting the environment.

We have different environmental issues at global level. Those are as follows:

- Depletion of natural resources
- Water pollution
- Air pollution
- Toxic chemicals & soil pollution
- Ozone layer depletion

- Global warming
- Loss of bio-diversity
- Extinction of wild life and loss of natural habitate
- Nuclear wastes and radiation issues
- Carbon dioxide emissions
- Population explosion
- Climate change

### Concluding Remark

In order to bring balance in our ecology and protect our environment, awareness and education on environmental issues should be given to not only men but also women. Environmental protection is very important for everybody. Our earth is endangered by humans, and can only be saved by us, humans. The present study focuses on the required skills of educated women for sustainable development with special reference to Odisha, one of the states in India.

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