

Gender Discrimination In Health & Education In Private And Municipal School Children

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ABSTRACT

The objective of the present study was to investigate the gender discrimination in health and education among primary school children from private and municipal schools located in Mumbai and suburbs. The sample of 100 parents from private and 100 parents from municipal schools children were selected randomly. Structured interview method was used to collect information about children's' physical health, mental health and education. The obtained results indicated that the parents of private school children look after their child's physical and mental health more effectively than the parents of the municipal school children. The results also indicated the discrimination between male and female child from both the groups of parents in terms of health and education.

Keywords: Gender, Health, Education

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As many other countries, Indian society is also a male dominated society. The existence of the preference for male child and female feticides are the indicators of lower status of women in India. Male domination also exists in the western countries however, the intensity of it in western countries is much more lesser as compared to India. Men's greater control over resources, over most social institutions, and over the construction of social meaning often leaves women dependent upon them socially and interpersonally (Kane, 1998). Because of male-domination in society, male child always gets importance in family than female child. Preference for sons is linked with social custom, religious belief and the perceived needs of the family and has worldwide variation.

In developed countries, a girl is encouraged to do almost everything that a boy does. However, in developing countries like India, a girl is encouraged to believe that she should not do the things that a boy does. This gender discrimination we experience almost all over in India. There is no marked existence of son preference in western countries like Great Britain, Hungary, Belgium, the USA etc. (Freedman and Coombs, 1974), but it is prevalent in many Asian countries such as, South Korea (Chung and Dasgupta, 2007), China (Tuljapurkar, S., Li, N. & Fildman, W., 1995), Vietnam, Taiwan and India (Jha, P., 2006).

In India, gender discrimination is a major problem and very sensitive issue. People love to have a baby boy, and not a baby girl. If a lady is pregnant, her family members are eager to know first whether it's a boy or a girl. And if it is a girl, they are not willing to foster the baby girl and go for abortion immediately. Since many years, women are experiencing the slavery and inferiority. The birth of a male child is welcoming in all families, but the birth of a female child is not welcoming in every family. National, demographic and statistical surveys in countries such as India, China, Pakistan, Taiwan and Korea have shown an increasing imbalance in their sex ratios in favour of boys over the past two decades (Miller, 2001; UNFPA, 2004; Visaria, 2007). In a family, if both male and female children are there, both may get different treatment. Variables like education, standard of living, ratio of health facilities to population, couples' propensity to cohabit with an elderly parent, and stringent family planning rules are all likely to influence son preference and the decision to discriminate against girls (Isabelle, 2009).

This study mainly focuses on gender discrimination practiced in the area of health and education, in private and municipal school children. In India, there exists an economic paradox. In other words, at one end there is so much of poverty, and at another end there is so much of luxurious life. One of the main objectives of the present research is to study the way reach and poor people treat their children. In other words, to see whether both reach and poor people treat a female child equally or do discriminate against her. Some have argued that parents with a preference for sons discriminate against daughters when they distribute scarce goods such as food or health care, leading to health, educational, economic, and reproductive difficulties later in life for these girls (Das G., 1987; Pebley and Amin, 1991; Li, 2004)

It has been observed that in India, parents also discriminate in terms of child rearing. Parents provide good nutritional food to a male child every day, but this consistency they don't maintain with a female child. Some parents provide only general food to a female child. When a male child is sick, parents take him to a private hospital or to a child specialist. However when a female child is sick, parents take her to a government hospital. Research suggests that son preference has a serious impact on the health and well-being of female infants and children in some parts of South and East Asia, and is a cause of severe excess infant and child mortality among females (Sudha and Rajan, 1999; Croll, 2000; Bandyopadhyay, 2003)

Education is a very important asset which everyone should have for development. However, women in India were not permitted to be educated. Education is a constitutional right; however parents violate this fundamental right of their female child. In India, girls face lower quality of education than boys (Geeta 2012). In education literature, the most frequently cited explanations of the gender gap in education are parental discrimination against daughters (Geeta 2012). If we think about today's world, the women's rate of education is increased. But do they get the same position in the family due to their education? Parents educate their girl child to increase the value of their daughter and in turn, the demand in marriage market for them. While parents give higher education to their male child to improve his status in society.

It is observed that many people in desire to have a male child, keep giving birth to a number of children unless they have a male child. If they succeed to give birth to a male child finally, the whole family pampers only that male child and the girls are neglected. And here begins the true discrimination. They send girls in municipal schools and the pampered one in private school. Not only this, but if those girls fall sick they are given treatment in municipal hospital and if the boy falls sick, he is given treatment in private hospital or to the specialist. Moreover, the girls do not get their full education but the family makes full provision for higher education for the boy.

In India, a dowry system is one of the reasons for why the poor people are not willing to give birth to a female child. However, the same reason may not trouble rich people, but yet they also discriminate among male and female child. Considering all these issues the present study was designed to see in city like Mumbai the parental approach towards their male and female children in terms of health and education.

Objective

- To study gender discrimination by parents of municipal school children and private school children in terms of health and education.

- To study parenting of municipal school children's' parents and private school children's' parents in terms of physical and mental health.

Hypotheses

1. Private school going children will be more physically and mentally healthy than the municipal school going children.
2. Male children will be more physically and mentally healthy than the female children from both municipal and private schools.
3. The male children from private school are more likely to receive higher education for job security and status, while the female children for economic independence in future.
4. The male children from municipal school are more likely to receive higher education for job security and status in future.
5. The female children from municipal schools are less likely to receive higher education than male children in future.

Operational variables

Independent Variable: There were two independent variables with two levels.

1. Primary school: municipal school and private school.
2. Gender: male and female.

Dependent Variable: Dependent variables in this study were Physical health, Mental Health, Purpose of Education and Willingness of Education.

Control Variable: Only those parents having both, the male child and female child were interviewed for this study.

Method

Sample

200 parents of primary school children; 100 parents of municipal school children and 100 parents of private school children were interviewed. Sample consisted of only those parents having both male and female child.

Tools

Structured interview questionnaire was used to collect the data. Questions were designed on parenting for studying physical and mental health of their child and purpose and willingness of giving education to their child.

Procedure

Data was collected door to door from slum area as well as municipal and private schools. The medium of interview was as per the requirement of subject that is Marathi, Hindi, and English. Each question was presented with options to respond. Parents answered the questions by using those options. Subjects were debriefed about the purpose of study.

Results and discussion

In this present study the interview method was used to collect data and it was coded with numbers. Further, the percentage of the obtained data was calculated. Observation method also used to check the hypothesis. Hence, the interpretation of this study was based on the percentages of the coded data and percentages of observed data.

Table 1: Observation about child's health

	Municipal school children			Private school children		
	Total	Male	Female	Total	Male	Female
Good	7%	14%	0%	31%	26%	36%
Normal	40%	36%	44%	55%	64%	46%
Weak	53%	50%	56%	14%	10%	18%

The first hypothesis states that, *Private school children will be more physically and mentally healthy than the municipal school children*. Table 1 depicts a general observation about health of municipal school children and private school children. The data shows that out of 100 municipal school children, only 7% had a good health, 40% had a normal health. The number of weak children is more than average; that is 53%. While out of 100 private school children, 31% had a good physical health, 55% had a normal health and 14% were weak by physical appearance. The data clearly shows that the first hypothesis is supported. This scenario is due to the lack of nutrition availability to the municipal school children. The children who attend the municipal school are basically located in slums where the economic condition is not sufficient to fulfill child's nutritional needs. Due to lack of nutrition children who are in municipal school seem to be physically weak than private school children.

The second hypothesis states that "*Male children will be more physically and mentally healthy than the female children from both municipal and private schools*". The data for male and female in Table-1 shows, that 14% municipal school male children had a good health as compared to female children which was found to be 0%. More numbers of female children (56%) were found to be physically weak as compared to male children (50%). Among private school children, the scenario is quite opposite. Data show a good number of male (26% & 64%) and female (36% & 46%) children in terms of good and normal health respectively. However,

the number of weak female children is higher (18%) than male children (10%). Thus, the data also supports the second hypothesis.

Table 2: Immunization of child

	Municipal School Children			Private School Children		
	Total	Male	Female	Total	Male	Female
Municipal Hospital	99%	98%	100%	50%	26%	74%
Private Hospital	1%	2%	0%	50%	74%	26%

In Table-2 the data shows that 99% of municipal school children were immunized at municipal hospitals as compared to private school children (50%). As far as gender is concerned, no single female child from municipal school children got immunized at private hospitals, as compared to 2% of male children; though it is also a very less percentage. Among private school children, this difference is vast. More number of female children that is 74% gets immunized at municipal hospitals as compared to male children, that is 26%. Rests of the 74% male children get immunized at private hospitals. This finding also supports both the hypotheses, especially in case of parents of private school children who discriminate among their male and female children.

Table 3 General health check up

	Municipal school children			Private school children		
	Total	Male	Female	Total	Male	Female
1 month	0%	0%	0%	2%	2%	2%
3 month	0%	0%	0%	1%	2%	0%
6 month	0%	0%	0%	19%	32%	6%
No	100%	100%	100%	78%	64%	92%

In response to the questions regarding general health check up, it was found that 100% parents of municipal school children never take their children for general health check up. However, 19% parents of private school children take their children for general health check up once in six months. As far as gender is concerned, the parents of private school children seems to be discriminating among male and female children. Only 6% of private school female children get regular health check up as compared to 32% of males after each six months. 92% of females do not get health check up at all. In this finding only private school children's data supported second hypothesis.

Table 4 In case of serious illness

	Municipal school Going children			Privateschool Going children		
	Total	Male	Female	Total	Male	Female
Municipal hospital	68%	64%	72%	7%	2%	12%
Private Hospital	32%	36%	28%	93%	98%	88%

The responses to the question, “in case of serious sickness, in which hospital do you take your child, municipal or private?” are depicted in Table-4. The data clearly shows that a large number of parents of municipal school children take their children to municipal hospitals for treatment during serious illness, whereas a large number of children from private schools are taken to private hospitals for the same. In terms of gender, the table clearly shows the discrimination among male and female children at both sides, in case of treatment during serious illness. A large portion of municipal school female children that is, 72% are treated in municipal hospitals as compared to male children. The same discrimination by parents appears among private school children. Here also, a higher number of female children, that is, 12% are taken to municipal hospitals for treatment in case of serious illness as compared to male children, that is, only 2%. This again supports both the hypotheses.

Table-5 depicts the percentage of responses to questions regarding nutritional food. Out of total sample studied from municipal school children, 37% children do not get any nutritional food at all. Considering the gender discrimination among the municipal school children, only 8% females get nutritional food every day as compared to males which are 14%. However, the data shows the opposite scenario in case of children getting nutritional food sometimes, and children getting only general food. Only 48% of males get nutritional food sometimes as compared to females that is 56% and 38% males get only general food as compared to females that is 36%.

Table 5 Nutritional food

	Municipal school children			Private school children		
	Total	Male	Female	Total	Male	Female
Every day	11%	14%	8%	71%	84%	58%
Sometime	52%	48%	56%	26%	14%	38%
General food only	37%	38%	36%	3%	2%	4%

Thus, the difference is seen among male and female children in terms of receiving the nutritional food every day. It shows that male children receive higher nutrition than female children. The same picture appears among private school children, where only 58 % of female children receives nutritional food every day as compare to male children being 84%. This supports again to both the hypotheses.

Table 6 Participation in Sports and other cultural activities

	Municipal School Children			Private School Children		
	Total	Male	Female	Total	Male	Female
Yes	94%	100%	88%	95%	94%	96%
No	6%	0%	12%	5%	6%	4%

Table-6 showing the data of participation of children in sports and other cultural activities. There is no big difference in municipal and private school children for taking part in sports and other cultural activity but when gender issue come, 12% of female are not allowed to take part in sports and other cultural activity from municipal school where as private school children are not showing any differences in gender as far as the sports and cultural activities are concern. This data finding was not supporting the first hypothesis and partially supporting the second hypothesis as differences are there in male and female participation from municipal school children. The parents of municipal school children are doing some sort of discrimination among male and female child to take part in sports and other cultural activity.

Table 7: Awareness about Mental Health Services

	Municipal School Children	Private School Children
Aware	2%	20%
Somewhat aware	1%	9%
Unaware	97%	71%

Table-7 shows the data regarding parental awareness about different mental health services available. The findings clearly show that there is almost no awareness among the parents of municipal school children about the mental health services as compared to parents of private school children. Among them also, only 20% parents of private school children are aware about mental health services, whereas 9% are somewhat aware about it. This data supports the first hypothesis.

The third hypothesis states that the male children from private school are more likely to receive higher education for job security and status, while the female children for economic independence in future. The fourth hypothesis states that male children from municipal school are more likely to receive higher education for job security and status in future. And the fifth hypothesis states that the female children from municipal schools are less likely to receive higher education than male children in future. Table 8 and 9 represents the data for the same.

Table 8: Purpose of Education

	Municipal School Children		Private school Children	
	Male	Female	Male	Female
Economic independence	26%	82%	8%	74%
Job Security and status	74%	18%	92%	26%

Table-8 depicts the data about parental purpose of education to their children. The data shows that not only parents of private school children, but also the parents of municipal school children educate their male child for job security and status; and educate their female child just to

make them economically independent. 74% parents of municipal school children educate their male children for Job security and status and 82% educate to their female children for economic independence. Almost the same scenario appears in case of parents of private school children. 92% parents of private school children provide education to their male children for job security and status, whereas 74% parents provide education to their female children for economic independence. This data supports the third hypothesis.

Table 9: Willingness of higher education

	Municipal School Children		Private school Children	
	Male	Female	Male	Female
Yes	86%	62%	100%	98%
No	14%	38%	0%	2%

Table-9 shows that there is no difference in terms of willingness to educate male and female children by parents of private school children. However, parents of municipal school children do discriminate in giving education to male and female child. 86% parents of municipal school going children show willingness to provide higher education to their male children; however 38% parents of municipal school children do not show any willingness to give higher education to their female children. The data presented in Table 8 and 9 support the third, fourth and fifth hypothesis.

When the matter is about the treatment, nutrition, schooling and other expensive things; it is obvious that it is really difficult for people staying in slum area to manage all the required things for their children. However, when the matter is about providing required things to children, gender discrimination appears to be strong among both parents of municipal school children and private school children and first priority is given to male children.

Conclusion:

The parents of private school children look after their child's physical and mental health more effectively than the parents of the municipal school children. There is discrimination between male and female child from both the groups of parents in terms of physical and mental health. The parents of private school children provide higher education to the male child for job security and status while to the female child for economic independence. The parents of municipal school children providing higher education to the male child for job security and status but they do not show much willingness to providing higher education to the female child.

Poor people are still away from all kinds of facility. Their children still do not get sufficient and nutritional food with other required things. Besides, the gender discrimination is still the major problem in Indian society.

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