



Education and employment: Key indicators of women empowerment in Kashmir, India

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ABSTRACT: Women empowerment in Kashmir valley is gaining momentum over the last few decades as women are playing important role in every sphere of life. The objective of the present study was to study the key indicators of women empowerment in Kashmir valley. The study revealed that education and assess to different resources has played a key role in enhancing the women empowerment in valley.

Keywords: Education, resources, women empowerment

I. INTRODUCTION

Eliminating gender differences in access to education and educational attainment are key elements on the path to attaining gender equality and reducing the disempowerment of women. In recognition of the pivotal role of education in development and of persistent gender inequalities in access to education, the elimination of gender disparity in primary education is one of the Millennium Development Goals [1]. The achievement of universal primary education has been a key goal of Indian planning since Independence. However, increasing access to primary schooling still leaves the twin questions of educational quality and school retention unanswered [2]. Continued economic development cannot be sustained with a population that has merely completed primary school; it needs a dependable supply of highly educated and skilled human capital for which a high level of educational attainment of both women and men is necessary [3]. However, ensuring a continued supply of skilled human capital to sustain economic growth is only one objective of reducing gender inequalities in educational attainment: the other is that education, particularly higher education of women, is a key enabler of demographic change, family welfare, and better health and nutrition of women and their families. Higher education has the potential to empower women with knowledge and ways of understanding and manipulating the world around them. Education of women has been shown to be associated with lower fertility, infant mortality, and better child health and nutrition.

An early age at marriage of women is an indicator of the low status of women in society; at the individual level too, an early age at marriage for a woman is related to lower empowerment and increased risk of adverse reproductive and other health consequences [4]. An early age at marriage typically curtails women's access to education and cuts short the time needed to develop and mature unhampered by responsibilities of marriage and children. Young brides also tend to be among the youngest members of their husbands' families and, by virtue of their young age and relationship, are unlikely to be accorded much power or independence. An early age at marriage also has many negative health consequences for women. For one, early ages at marriage typically lead to early childbearing. Having a child when the body is still maturing increases the risk of maternal and child mortality. Further, women married very early are typically sexually immature and inexperienced, but are often married to much older sexually experienced men. This combination of early ages at marriage and large spousal age differences can put women at a higher risk of sexually transmitted infections including HIV [5]. Specifically, young women married early may be subject to a higher risk of infection because of prior sexual experiences of their older partners combined with their inability to negotiate safe sex due to their own young age and immaturity and, often, the large spousal age difference.

In addition to education, employment can also be an important source of empowerment for women. Employment, particularly for cash and in the formal sector, can empower women by providing financial independence, alternative sources of social identity, and exposure to power structures independent of kin networks [6]. Nonetheless, early ages at marriage and child bearing and limited access to education limit women's ability to participate in the labour market, particularly in the formal sectors. By contrast, male gender roles are compatible with employment and men

are typically expected to be employed and be breadwinners for their families. The objective of the present study was to study the key indicators of women empowerment in Kashmir valley.

II. METHODOLOGY

A. Population for the study

The present study has been carried out in Kupwara, all married women of reproductive age (15-49) living in Kupwara constitute the population for the present study. District Kupwara was originally part of erstwhile undivided district Baramulla. District Kupwara was carved out of district Baramulla in July 1979. Kupwara town was chosen as district headquarter. The district consists of three tehsils namely, Kupwara, Handwara and Karnah. There is no written proof why the district headquarter is known as Kupwara.

B. Primary data collection

The survey was conducted during last week of March, 2008 in Kupwara Block and last week of April, 2009 in Sogam Block. Information regarding household and respondent was collected from the office of concerned union councils, district coordinating offices and from related web sites. The researcher made his first visit to the study area one week before the data collection in order to select household, respondents and developing rapport with local people. During his first visit researcher selected the household and also got the verbal consents of respondents and their heads of household for interviews. In this regard local leadership and some educated people helped the researcher to a great extent. The University bus was arranged for transportation that provided door to door service to the survey team. For convenience of enumerators and development of better rapport with respondents, two enumerators were sent to each selected household for data collection. Field work of the enumerators was supervised and proper feedback was given to them on the spot.

C. Interview schedule

For the purpose of quantitative analysis, data were collected through well organized interview schedule consisted of both close end and open ended questions regarding the research objectives. The questions of the interview schedule were discussed with the supervisory committee and the experts in the relevant field in order to ensure the content validity of the interview schedule. The qualitative interview schedule was planned to explore the role of microfinance in the empowerment of women. The present interview schedule provided an opportunity to key informants or community leaders to express their views in an open and friendly environment.

III. RESULTS AND DISCUSSIONS

Education: There is gender equality in children's school attendance in urban areas; but, in rural areas, the female disadvantage in education is marked and increases with age. School dropout beyond primary school is a major problem, not just for girls, but also for boys. A consequence of high dropout beyond the primary school level is the low educational attainment of adults. It was found that only 20% of women are 10th pass qualification in the study area (Table 1).

Table 1: Educational attainment of the respondents: block-wise.

Educational attainment	Rural						Urban						Grand total	
	Dudwan		Regipora		Total		Darpora.		Lalpora.		Total		No.	%
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%		
Below 8th	5	10	15	30	20	20	9	18	18	36	27	27	47	23.5
10th	3	6	11	22	14	14	14	28	12	24	26	26	40	20
12th	13	26	15	30	28	28	16	32	7	14	23	23	51	25.5
Graduate	8	16	6	12	14	14	6	12	6	12	12	12	26	13
Post Graduate	10	20	2	4	12	12	4	8	4	8	8	8	20	10
Technical	1	2	0	0	1	1	1	2	0	0	1	1	2	1

Age at marriage: Most of the women in our study were unmarried and only 2.5% of the women were not married during the study period. Further, it was found that in valley only few women are divorced as compared to other parts of India (Table 2).

Employment: The women of Kashmir are now playing their part in every sphere of life. Although, most of the women are house wives, but good number of women have representation in educational institutes, aganwadi workers, microfinance sectors as well (Table 3).

Table 2: Block-wise marital status of the respondents.

Married status	Rural						Urban						Grand total	
	Dudwan		Regipora		Total		Darpora		Lalpora.		Total			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Married	2	2	0	0	3	3	0	0	2	4	2	2	5	2.5
UnMarried	44	88	44	88	88	88	50	100	43	86	93	93	181	90.5
Widowed	3	6	6	12	9	9	0	0	5	10	5	5	14	7
Separated/ Divorced	0	0	0	0	0	0	0	0	0	0	0	0	0	00
Total														100

Table 3: Occupation of the respondents: block-wise.

Occupation	Rural						Urban						Grand total	
	Dudwan		Regipora		Total		Darpora		Lalpora		Total			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Nil (house wife)	6	6	12	24	18	15	9	18	12	24	21	21	36	18
House maid	0	0	0	0	0	0	2	4	4	8	6	6	6	3
Worker	12	12	6	12	18	12	0	0	0	0	0	0	12	6
Teacher anganvadi	4	4	3	6	7	5	0	0	1	2	1	1	6	3
Helper anganvadi	2	2	0	0	2	1	0	0	0	0	0	0	1	.5
Teacher tuition	0	0	0	0	0	0	1	2	2	4	3	3	3	1.5
Official local body	10	10	1	2	11	6	1	2	0	0	1	1	7	3.5
Casual worker	0	0	7	14	7	7	1	2	4	8	5	5	12	6
Micro enterprise	66	66	21	42	87	54	36	72	27	54	63	63	117	58.5

Female household headship: Fourteen percent of all households in India are headed by a female, up from 9% in Sogam, 13 years earlier. Female household heads are less educated and older, on average, than male household heads. Further, households headed by females are over-represented in the lowest wealth quintiles and under-represented in the highest wealth quintiles. These data suggest that female-headed households are more likely to be economically vulnerable than male-headed households.

Access to resources: Women's access to resources including media, health care, and money that they control is greatly circumscribed (Table 4).

Table 4: Presence/Possession of Basic Amenities: block-wise.

Basic Amenities	Rural						Urban						Grand total	
	Dudwan		Regipora.		Total		Darpora.		Lalpora.		Total			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Safe drinking water	30	20	44	10	74	26	36	14	43	7	79	21	153	76.5
Sanitary Latrines	42	8	37	19	79	21	43	7	39	11	82	18	161	80.5
Own house	47	3	39	11	86	14	47	3	41	9	88	12	174	87
Household electrification	48	2	41	9	89	11	46	4	42	8	88	12	177	88.5
LPG connection	29	21	26	24	55	45	37	13	38	12	75	25	130	65
Healthy environment	38	12	17	33	55	45	34	16	38	12	72	28	127	63.5

In addition, only a minority of women are allowed to go alone to various places outside the home. Since women are over-represented in poorer households and under-represented in wealthier ones, their per capita resource access is lower than for men. This also means that boys are more likely than girls to be growing up in wealthier households with all the related benefits.

Gender relations: Although a majority of men say that husbands and wives should make decisions jointly, a significant proportion feels that husbands should have the major say in most decisions, particularly in decisions related to large household purchases and visits to the wife's family and relatives. More than half of women and men agree with one or more reasons that justify wife beating. Both are most likely to agree that wife beating is justified if a woman disrespects her in-laws and if she neglects the house or children. Few women and men, however, agree with norms that do not allow women to refuse sex to their husbands.

Decision making: Among women who are employed and have earnings, only one-fifth have a major say in how their own earnings are used; and only 7 in 10 have a say in how their husbands' earnings are used.

In about one-fifth of couples where both husband and wife have earnings, women earn at least as much as their husbands. However, it is women who earn about the same as their husbands, rather than those who earn less or more, who are more likely to have a major say in the use of their husbands' earnings. Less than two in three currently married women participate, alone or jointly, in decisions about their own health care, large household purchases, purchases for daily needs, and visits to their own family and relatives. Having earnings that women control increases their participation in household decisions. Notably, education is consistently and positively associated with joint decision making and not with decision making alone.

Gender and health and nutritional outcomes for children: There is a persistent, if small, gender differential in favour of boys in full immunization coverage. Having a mother who is empowered in terms of having higher education or having a major say alone in the use of her husband's earnings benefits a girl child in terms of her full immunization status more than it benefits a boy child. Thus, these forms of women's empowerment are likely to help reduce the gender differential in full immunization. Gender differentials are not significant in the proportion of children age 0-35 months who are underweight. Notably, controlling for wealth, if a mother experiences spousal physical or sexual violence, the likelihood of a child being underweight is significantly higher for boys but not girls. Thus mothers' experience of violence is likely to increase gender differentials in underweight by increasing the likelihood that boys will be underweight.

Gender and nutritional status of adults: Women are more likely than men, and among couples, wives are more likely than husbands, to be too thin. Risk factors for women being too thin include two of the indicators of women's disempowerment, namely, not having a main say in decisions about large household purchases and experiencing spousal physical or sexual violence. Even controlling for wealth, employed women are more likely than unemployed women to be too thin. However, among employed women, having no earnings or not have a main say over own earnings is associated with an increased likelihood of being too thin.

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