Demographic Indicators and Female foeticide in Himachal Pradesh

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A sloka of Atharvaveda says "The birth of a girl, grant it elsewhere. Here, grant a son." Thousands of years later, this thing stands very true in modern times as well, when, despite the so called modernity, industrialization, literacy and equality, parents still pray thus. The constitution of India guarantees equality for women. It has empowered the state to adopt measures for affirmative discrimination in favour of women and it has imposed a fundamental duty on its citizens to uphold the dignity of women. The preference for sons or more number of sons than daughters has been documented in several countries in the world. Particularly in India, the preference for a son is very strong and pervasive and it has been frequently cited as one of the major obstacles in the way of reducing the national fertility level. The preference for a male child and discrimination against the female child are causing the rapid disappearance of female children in India. 35 million females were found to be missing according to the census of 2001, which was 32 million during 1991. As per the census of 2011, the child sex ratio of India has declined from 927 to 914 females per 1000 males, which is the lowest since the country's independence and in Karnataka the sex ratio is 936 females per 1000 males. Female foeticide is one of the extreme manifestations of violence against women-a social problem that is now spreading unchecked across the country. Female foetuses are selectively being aborted after pre-natal sex determination, thus denying a girl's 'RIGHT TO LIFE' (Siddharam et.al, 2011).

The term "foeticide" is a combination of the Latin words fetus and caedo which means to kill an unborn child. The practice of female foeticide involves the detection of the sex of the unborn child in the womb of the mother and the decision to abort it if the sex of the child is detected as a girl (Joshi and Bajwa, 2012). Female foeticide is an extreme manifestation of violence against women. Female foetuses are selectively aborted after pre-natal sex determination, thus avoiding the birth of girls. In some parts of the country, the sex ratio of girls to boys has dropped to less than 800:1,000. The United Nations has expressed serious concern about the situation (Grewal and Kishore, 2004). One slogan of the female feticide industry is "better 500 rupees now [for an abortion] rather than 50,000 rupees later [for a dowry]." The first amount equals about \$11 (USD), the second about \$1,100. India has a longstanding tradition of requiring a wife's family to support her financially in her marriage. This begins with a dowry of extraordinary sums of cash, gold, and goods. Ultrasonography is being used as a non-invasive technique for sex determination, even in remote areas and even quacks has access to them. In 1994, the Government of India enacted the PNDT (Pre Natal Diagnostic Techniques) Act, that made revealing the sex of the foetus a criminal offence. The need of the hour is to stress upon other avenues or alternatives that can strengthen the law and can bring about the desired social change. Keeping in view the above said facts this present study has been design with the objective:

- To study the declining trends in child sex ratio in Himachal Pradesh.
- To study the socio-demographic indicators and for female foeticide in Himachal Pradesh.
- To study the perception of the respondents towards female foeticide.

Research design and Sample

The design for this study was exploratory as well as descriptive. On the basis of declining trend of child sex ratio, we have tried to find out the concerned reasons by which sex ratio has been decreasing, consequent upon increase in female foeticide. In the first stage, a sample of the districts was drawn. Himachal Pradesh consists of twelve districts. It was decided to select only those districts in the study which have lowest child sex ratio i.e. less than 900. As per the census 2001, districts Kangra, Una, Hamirpur and Bilaspur were selected based on these criteria. In the second stage, the blocks falling under these four districts were considered. All the 26 blocks were included in study. In the third stage, the villages were selected from these blocks. From each block the village having maximum difference between male and female in the age group of 0-6 was included. Hence, 26 villages were purposively selected. In the fourth stage, the identification of women who had undergone female foeticide posed a great challenge. To overcome this problem and to avoid the opposition from the villagers, it was decided to include all those women in the study who were in the age group of 18-44 years. In this study, only those women were included who had first girl child and a male child after a long span from the birth of the first girl child. As per the information gathered from the record of the panchyat and the health workers, there were 4536 women in 26 villages. Fifty per cent of this i.e. 2268 have been considered for this study. The unit of study was the women in the reproductive age group with first girl child with between 0-6 years of age. Women who gone for foeticide have been identified with the help of information obtained through the informal discussion with the anganwadi workers, old ladies, midwives (Daies) relatives of respondents, retired doctors, female health workers and some of the respondents who had accepted that they have been gone for the abortion of female foetus, such women were 515

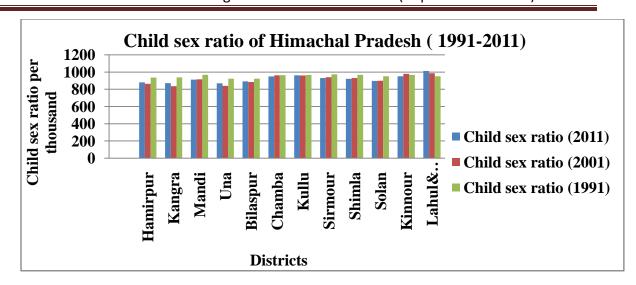
which constituted foeticide group in this study and the remaining 1603 formed the non female foeticide group. Of the remaining 150 respondents, some were not available at the time of interview and some of them have refused to give information on this account, as a result they were excluded from the study.

Tools and Data collection

A socio- economic status scale was used comprises of general information such as: age, family type, type of house education and income. A questionnaire was framed to have in-depth interaction with the respondents. More than fifty questions were asked from each respondent pertaining to the status of a girl child in these villages, reasons for the declining child sex ratio and their attitude about female foeticide.

The lack of Girls in Himachal Pradesh:

In Himachal Pradesh the female survival situation was quite favourable until 1991. However, the 2001 census indicated a considerable decline in the sex ratio over the 1991-2001 census periods particularly in the age group 0 to 6 years. However, the situation worsened in the next ten years and, as shown in the 2001 census. Himachal Pradesh is one of the ten most vulnerable states in the India where the female sex ratio has decreased substainly from 976 in 1991 to 970 in 2001. The decline in child sex ratio under six years of age was even sharper. A startling fact that has come to light is the sudden decline in the sex ratio in some of the districts that earlier had a favourable sex ratio. Nine out of twelve districts being the worst in 2001. The sharpest decline in child sex ratio has been noted especially in district Kangra, Hamirpur, Una, Bilaspur and Solan which are adjoining districts of Punjab and Haryana states. What is even more alarming is that the female ratio had dropped to less than 800 in 41 percent of villages across the state. In Himachal Pradesh, it is estimated that 7,500 female foeticides were done every year, making its gender ratio among the lowest in the country (Census of India 2001).



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Figure-1

Table-2, Child sex ratio of Himachal Pradesh (1991-2011)

S. N.	Districts	Child sex ratio (1991)	Child sex ratio (2001)	Child sex ratio (2011)
1	Hamirpur	936	864	881
2	Kangra	939	836	872
3	Mandi	968	916	912
4	Una	923	839	870
5	Bilaspur	923	884	892
6	Chamba	965	962	950
7	Kullu	966	960	962
8	Sirmour	973	940	930
9	Shimla	968	930	922
10	Solan	951	900	898
11	Kinnour	968	979	952
12	Lahul& Sapiti	951	986	1013
	Himachal Pradesh	951	896	906

Source: Census of Himachal Pradesh, India, 2011

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Table 1 and figure-1 indicates that the child sex ratio in the age group of 0-6 years has improved from 896 to 906 in Himachal Pradesh from 2001 to 2011. It is interesting to note that in 2011, six more districts of Himachal Pradesh have shown the declining trend of child sex ratio, may be due to the rapid penetration of modern medical technology in the rural area. Himachal Pradesh claim to be among the most progressive hilly state in the country, but the girl child continues to remain under threat. The latest figure available with the state as mention in the table indicates that child sex ratio is 906 per thousand boys in the 0-6 age group. Through there is a improvement of 10 point to 2011. Table also indicates that there are five districts having child sex ratio below 900 girls per 1000 boys in 2001. Still, these districts are considered red alert districts of the state for the last two decades. Una is having lowest child sex ratio i.e. 870 girls per thousand boys. Though there is improvement in the child sex ratio in Una district

S N Frequency Percentage

(i.e. 31 points) from 839 to 870 in 2011. Table also reveals that there is decline in the child sex ratio in another six districts from 1 point to 27 points. It is interesting to note that one of the tribal district known as Kinnaur has shown the highest point in declining the child sex ratio i. e. 27 points. It means that education and technology has reach or they have become much more aware about the medical technology far off tribal belt of Himachal Pradesh, the practice of female foeticide is also fast making inroads there. Districts which are having child sex ratio below 900, still leading in literacy rate in the state. Lahul & Sapiti is only district where child sex ratio has improved up to 27 points (986-1013).

The table also shows in Himachal Pradesh the child sex ratio in the age group of 0-6 years has improved from 896 to 906 in Himachal Pradesh from 2001 to 2011. It has been observed that in 2001, the deficit of girls is highest in district Kangra and therefore lowest child sex i.e. 836 in the state. By observing different blocks of Kangra district, it becomes very sad to know that all blocks have declining trend in child sex ratio in 2001. The Kangra district has second position in overall sex ratio i.e.1027, but lowest child sex ratio among all districts in Himachal Pradesh. Kangra is at third position in overall literacy i.e. 80.68 and also at third position in female literacy i.e. 73.57 percent. There is a popular belief that literacy rates have a direct bearing on population, and that literate people are less prone to gender bias. But this logic does not hold true in Himachal Pradesh. But according to 2011 Una district have the lowest child sex ratio.

Table-2

П	Ago		
1	Age 18-26	1042	49.21
	27-35	396	18.69
	36-44	680	32.10
	Total	2118	100.00
II	Family Structure		
	Joint family	1589	75.02
	Nuclear family	529	24.98
	Total	2118	100.00
III	Caste		
	General	995	46.98
	SC	594	28.04
	ST/OBC	529	24.98
	Total	2118	100.00
IV	Type of house		
	Kacha House	884	41.74
	Semi pacca house	970	45.80
	Pacca House	264	12.46
	Total	2118	100.00
V	Religion		
	Hindu	1800	84.98
	Muslim	173	8.16
	Sikh	79	3.72
	Any other	66	3.11
	Total	2118	100.00
VI	Income		
	25,000-1 lakh	1341	63.31
	1 lakh-and above	777	36.68
	Total	2118	100.00
VII	Education		
	Up to middle	1260	59.49
	High-graduation	606	28.61
	Post-graduation	252	11.90
	Total	2118	100.00
VIII	Occupation		
	Working group	451	21.29
	Nonworking group	1667	78.71
	Total	2118	100.00
	IOLAI	2110	100.00

I Age: Age is a biological component of human personality but it has social relevance because it indicates level of social maturity in the community or society. The age wise classification of the respondents into three categories (Table-2) shows that nearly half of the respondents fall in the age group of 18-26 years (49.21%). The data further reveals that 18.69 per cent of the respondents are between 27-35 years and 32.10 per cent in the age group of 36-44 years. It means 18-26 years age group more comparative to other two groups.

II Family Structure

Family is a group of people related by blood, marriage, or adoption who form an economic unit, are

responsible for the care of children and often live in the same household. There are mainly two types of

family structure i.e. joint family and nuclear family that has been taken up in this study. Table 2 show

that majority of the respondents belongs to joint family i.e. 75.02 per cent and rest i.e. 24.98 per cent

are with nuclear family. It means more respondent living in joint family. It may be due to reason in

Himachal Pradesh, joint family structure is more prevalent due to old tradition.

III Caste

In traditional India every person was born into specific social caste and remained in it for life -there

was very little movement into or out of any caste. Thus in Indian context, caste constitutes an important

structural variable. Moreover caste status being related to social status, each caste may represent a

different set of norms and values regarding family patterns. Therefore, in the present study the caste of

the respondents has also been considered important. The data with regard to the caste wise

classification of respondents (Table-2) reveals that nearly half of respondents (46.98%) belong to the

general category, while 28.04 per cent respondents belong to SC category and 24.98 per cent belong to

ST/OBC category. The concentration of high caste people in the study sample is due to the fact that

higher castes constitute more than half of the population of the state.

IV Type of house

The classification of the respondents according to their settlement level into three categories as

presented in table 2 shows that largest proportion of the total respondents is settled in semi pacca

houses (45.80%) followed by kacha houses (41.74%) and remaining i.e. 12.46 per cent of respondents

are residing in pacca houses. Settlement level of the respondents is greatly influenced by economic

status of people as a result it becomes of the most important determinants which reflects economic

conditions of a person in the society. The data in above described table reveal that there is a prevalence

of semi pacca house over pacca houses and kacha houses under the study area.

V Religion

Religion as an institution plays a vital role in one's life. Religion as a system of beliefs about the

nature of force(s) ultimately shaping man's destiny and the practices associated therewith, shared by

the members of the group. These belief systems, while concerned with human condition, are not what we ordinarily mean when we think of religion. Hence, it is a system of beliefs and practices by which a group of people interprets and responds to what they feel is super natural and sacred. Table 2 reveals that in the total sample, the percentage of Hindu religion's respondents is highest (84.98%) among all the religions followed by Muslims 8.16 per cent, Sikh 3.72 per cent and any other religion 3.11 per cent. It is clear from the above table that a highest number of respondents included in the sample are Hindus. It is because Himachal Pradesh is dominated by Hindu religion.

VI Income (annually)

Income of a person is one of the most important determinants which reflect economic status of a person in the society. Thus the income distribution in a particular population determines the economic structure of that society. The reason being that many areas of social life such as standard of living, educational attainment, family size, age at marriage, status of women etc. to a great extent are determined by income of the individual. The data on respondent's income has been divided into two categories. The table 2 reveals that 63.31 per cent of the respondents reported their income between 25000- 1 lakh and another 36.68 per cent respondents reported their income between 1 lakh and above. One of the reasons for low income of respondents is that most of the respondents were engaged in agriculture as a major occupation in the hilly state, which is mainly dependent upon the natural rain.

VII Education

Education preserves cultural values and fosters social change by inventing new technologies and testing existing knowledge. It has both a practical and a symbolic value. Expansion of the educational system reflects various status group's desire to limit access to the wealth, power and prestige that go along with their position. Educational system perpetuates economic inequalities; schools reproduce the skills needed for the labour force at primary level and reinforce qualities important for higher status professions at the college/ university level. In our study the table-2 indicate the distribution of respondents according to their educational qualification. The educational profile of respondents reveals that in the total sample population, proportion of the respondents who have attained the education up to middle is higher than the highly educated (high to post graduation) respondents. Education wise break-up of respondents further makes it evident that more than half of the respondents (59.49%) have received their education up to middle level, while 28.61 per cent of the respondents were educated up

to graduation level. Still another 11.90 per cent of the respondents were educated up to post-graduate level. This data shows that most of the respondents have attained their education up to middle level.

VIII Occupation

Different kinds of occupation in Indian villages reflect the base of their socio-economic culture. Since the ancient period, the Indian villagers have been involved in various occupations out of which, agriculture is the principal one. Apart of this, villagers are involved in other occupations like fishing, farming, cottage industry, pottery, business, various small, medium or large scale industries, carpentry etc. The status of a person also depends upon the nature of occupation that he/she is engaged in. The nature of occupation depends upon his /her educational qualification and which in turn determines his/her income. In this study occupation has been divided only in two categories i.e. working group and non working group. In other words the distribution of respondents by their occupation indicates that who are in agricultural activities are classified as non working group and who are in government sector services and small or petty business activities are classified as working group. The data on occupational status reveals that maximum number of respondents (78.71%) are engaged in primary activities i.e. agriculture. This is indicative of the facts that very few of them have been able to engage in other occupation mention above (i.e. 21.29%).

After looking into the socio-economic profile of the respondents their distribution has also been described in relation to their division into female foeticide and non female foeticide group. From this some important findings have been emerged which are described in the proceeding descriptions.

Table 3 (a)

Demographic and social indicators and distribution of the respondents into female foeticide and non female foeticide groups

S.No.	Demographic and	Female Foeticide	Non Female	Total number of
	social indicators		foeticide	respondents
ı	Age			
	18-26 years	197 (38.25)	845 (52.71)	1042 (49.21)
	27-35 years	158 (30.68)	238 (14.85)	396 (18.69)
	36-44 years	160 (31.07)	520 (32.44)	680 (32.10)
	Total	515 (100.00)	1603 (100)	2118 (100)
II	Family type			
	Nuclear family	127 (24.66)	402 (25.08)	529 (24.98)
	Joint family	388 (75.34)	1201 (74.92)	1589 (75.02)
	Total	515 (100)	1603 (100)	2118 (100)
Ш	Caste			
	General	318 (61.75)	677 (42.23)	995 (46.98)
	SC	107 (21.78)	487 (30.38)	594 (28.04)
	ST/ OBC	90 (17.47)	439 (27.39)	529 (24.98)
	Total	515 (100)	1603 (100)	2118 (100)
IV	Type of house			
	Kacha House	134 (26.02)	750 (46.79)	884 (41.74)
	Semi pacca house	188 (36.50)	782 (48.78)	970 (45.80)
	Pacca House	193 (37.48)	71 (4.43)	264 (12.46)
	Total	515 (100)	1603 (100)	2118 (100)

I. It is evident from the data in the table 3 (a) that of the three age categories a sizable proportion of the women (38.25 %) aged 18-26 years have gone for female foeticide where as in the higher age category their proportion is about 31 per cent. However, as against the among non female foeticide group, a little over half (52.71 %) did not opt for female foeticide. The prevalence of female foeticide in younger age group (18-26 years) within the reproductive age group (18-44 years) may be attributed to social pressure on women to give birth to a male child. These findings have been found in resonance with the earlier studies conducted by Walia (2005); Patel (2004). They also found that the most productive age group i.e. aged between 27-35 years has more favorable attitude towards a boy in their family.

II. Table 3 (a) reflects that in the female foeticide group about one third of women (74.34 %) from joint families have gone for female foeticide as against only one forth (24.66%) from nuclear families. It means joint families are more prone to female foeticide than nuclear families. This may be amounted to increase pressure for son and decision of the elders. This finding corresponds to the

findings of earlier studies conducted by Desai (2005), (1994); Rahman and Rao (2004); Ganatra (2001);

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Pande (1999); and Mandelbaum (1988). They have found that strong patriarchal joint family system

gradually has given rise to the practice of ancestral worship, resulting in a strong preference for sons.

However, such decision to go or not to go for female foeticide rests with the couple among nuclear

families. Among women in non female foeticide group this distribution is almost similar. Hence the

pressure for son and subsequent female foeticide does not operate. This may be due to the fact that the

respondents and their family members in this group may have equal preference for the boy and the

girls. The attitude is further attribute to increase literacy and modern outlook of the life.

III. Table- 3 (a) indicates that of the different castes, a sizable proportion of respondents from the

general category, (61.75 %) have gone for female foeticide however, as against the female foeticide

group a less than fifty per cent (42.23%) did not opt for female foeticide. We can say that the trend of

female foeticide is more common among the people of general caste in female foeticide group. It may

be because to maintain their status in the society higher caste people won't hesitate to make use of the

medical facility to abort the female foetuses because they do have more purchasing power to avail

these facilities in consultation with remorseless doctors who do not regret this horrible and gruesome

torture they inflict upon unborn innocent girl child foetus. Among the respondents of schedule caste

and ST/OBC category, (21.78% and 17.41%) respondents respectively have gone for female foeticide.

Among women in non female foeticide group, their proportion is (i.e. 30.38%) in schedule caste and

27.39% in ST/OBC category respondents. It means that female foeticide is also becoming more common

among the SC and ST/OBC in female foeticide group where as only 30 or less them 30 per cent

respondents of non female foeticide group did not opt for female foeticide.

IV. Table-3 (a) indicates the classification of houses of respondents in both the groups. From the

respondents living in kacha houses, 26.02 per cent respondents have undergone for female foeticide.

Among the respondents living in semi pacca houses, 36.50 % have gone for female foeticide. Also among

the respondents living in pacca houses, 37.48 % have come under the category of female foeticide

group. In non female feoticide group the data is totally different as 46.79 per cent respondents are from

Kacha houses, 48.78 per cent from semi pacca houses and just 4.43 per cent respondents from pacca

houses had not gone for female foeticide.

Table 3 (b)

Demographic and social indicators and distribution of the respondents into female foeticide and non female foeticide groups

S.No	Demographic and social indicators	Female Foeticide	Non Female foeticide	Total number of respondents
V	Religion			
	Hindu	450 (87.38)	1350 (84.22)	1800 (84.98)
	Muslim	23 (4.47)	150 (9.36)	173 (8.16)
	Sikh	28 (5.44)	51 (3.18)	79 (3.72)
	Any other	14 (2.72)	52 (3.24)	66 (3.11)
	Total	515 (100)	1603 (100)	2118 (100)
VI	Income			
	25,000-1 lakh	228 (44.27)	1113 (69.43)	1341 (63.31)
	1 lakh- and above	287 (55.73)	490 (30.57)	777 (36.68)
	Total			
		515 (100)	1603 (100)	2118 (100)
VII	Education			
	Up to middle	154 (29.90)	1106 (68.99)	1260 (59.49)
	High – Graduation	163 (31.65)	443 (27.63)	606 (28.61)
	Post- graduation			
	Total	198 (38.45)	54 (3.37)	252 (11.90)
		515 (100)	1603 (100)	2118 (100)
VIII	Occupation			
	Working group	305 (59.22)	146 (9.11)	451 (21.29)
	Nonworking	210 (40.78)	1457 (90.89)	1667 (78.71)
	group			
	Total	515 (100)	1603 (100)	2118 (100)

V. The table 3 (b) reflects the categories and percentage of religion in female foeticide and non female foeticide group. We have found that significant number of the respondents of Hindu religion, i.e. 87.38 per cent have undergone female foeticide followed by the Sikh i.e. 5.44 per cent and Muslim religion respondents (4.47%). Among women in non female foeticide group, this distribution is almost similar in different religions. It is evident from the data that there is more prevalence of female foeticide among the respondents of Hindu religion caused by socio-economic factors. It may be because Himachal Pradesh state is dominated by the Hindus and according to the Hindu mythology it is a son who can alone perform the last rites. Also there are strong cultural forces that result in son preference preventing the division of the property, preventing wealth outflows through dowry.

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VI. Table-3 (b) indicates the division of income level groups in female foeticide and non female foeticide groups. We have found that among the respondents who have their income between 25,000 to 1 lakh,

44.27 per cent respondents have under gone female foeticide whereas the respondents having their

income above 1 lakh and above, more than half (55.13%) respondents have undergone female foeticide.

Whereas, non female foeticide of respondents more than half (69.43%) from 25000 1 lakh income group

did not opt for female foeticide followed by 30.57 per cent respondents from 1 lakh and above. It may

be due to the reason that sons can provide old age support. People with more disposable income tend

to use more expensive and sophisticated technologies to achieve their ends.

VII. Education is considered to be one of the most important factors of social change because it has

affected individual in various ways. Table- 3 (b) shows the percentage of educational categories. From

the respondents who have attained education up to 8th standard, 30 per cent have gone for abortion

due to female foetus. From the respondents who have got the education level from high school to

graduation level, 31.65 % respondents have followed the same practice. Among the post graduate

respondents, 38.45 per cent respondents have come under the category of female foeticide group.

Among respondents in non female foeticide group, this distribution is entirely different. Less educated

women have more percentage i.e. (68.99%) that did not opt for female foeticide. It means that less the

education less will be tendency of women for female foeticide.

VIII. Occupation determines one's standard of living. Since our respondents are engaged in different

occupations, therefore, it can be expected that they might have resorted to different standards of living

with regard to different aspects of life. Table-3 (b) indicates the percentage of respondents between

working and non working groups in female foeticide group and non female foeticide group. Table shows

that a 59.22 per cent respondent comes under the category of female foeticide group as compare to

40.78 per cent respondents from non female foeticide group. It means working women are more prone

to female foeticide than non working women. Among women in non female foeticide group, this

distribution is almost different as 9.11 per cent respondents from working group and 90.98 per cent

respondents from non working group did not opt for female foeticide. It may due to the reason that

there must be one son in the family who can raises the status of the family and also must fulfill the

family linkages, as he is a support provider in old age.

Table-4

Distribution of respondents on the basis of their perception about birth of the girl child

Group	Yes	No	Total
Female Foeticide	497 (96.50)	18 (3.50)	515 (100)
Non foeticide	487 (30.38)	1116 (69.62)	1603 (100)
Total	984 (46.45)	1134 (53.55)	2118 (100)

$$\chi^2 = 685.17$$
 $df = 1$ Significant $p < 0.01$

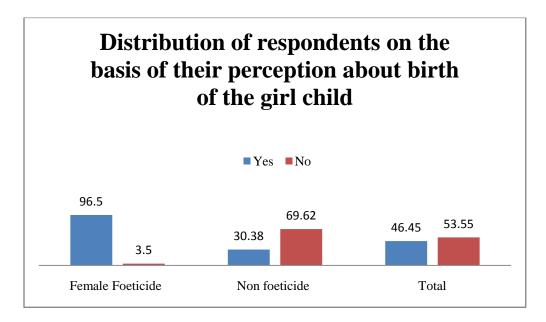


Figure-2

It is believed that parents who have only daughters which were considered as fruits of their previous life's 'Karma'. In order to understand the opinion about birth of a girl in the family, the question was posed to the respondents "Do you think that people generally believe that coming of girl means due to bad stars, bad luck and sin of past life? The responses received in this context are presented in table-4 and figure 2 which suggest that from the female foeticide group, 96.50 per cent respondents favour the opinion as against 3.50 per cent respondents. Further from the non female foeticide group, 69.62 per cent respondent's disfavour the opinion. This may be due to the reason that most women have common belief that their status by giving birth to girl child will decrease in

community and will go up with the arrival of a son. Statistical analysis of the data indicates a significant trend of opinion as the value of Chi- square at df 1 is 685.17 which is higher than the value at 0.01 level of probability. A psychological reason includes attitude, desire and perceptions status of the respondents towards female foeticide. Status thus plays an important role in the preference for sons, giving birth to a son is perceived as a chance for upward mobility, whereas giving birth to a girl is believed to cause downward mobility of the household and the family. Having more daughters is seen as a burden on the shoulders of the parents and the family. This burden is not only economical, but having more daughters is also seen as a burden in the ritual, religious and sexual sense, Patel (2007).

Himachal Pradesh government policies to check female foeticide

- The State Government was taking effective steps to check female foeticide in the Himachal Pradesh.
- Government would give an additional grant of Rs. 5 lakh to one panchayat in each district, which
 would register more female childbirths. Government taking steps to check unlicensed medical
 practitioners.
- Indira Gandhi Balika Surksha Yojna had been started in the State to check the practice of female foeticide and the State Government would provide an incentive of Rs. 25 thousand to those parents who would adopt family planning after one girl child and Rs. 20 thousand to those parents who would adopt the same after two girl children under the scheme. Rs. 10 thousand would be given to person giving information about such crime.
- Himachal Pradesh has a rich culture where females were held in high esteem and practices like female foeticide has crept in the society as a result of external influences. Government is taking effective steps to keep check on private clinics that were indulging in practices like female foeticide. Directions have been given to concerned departments to conduct raids against unlicensed medical practitioners so that they could not play with the lives of the people. (The Tribune, 2008) A joint team of the police and medical department were successful in catching a local doctor conducting pre- conception and pre-natal determination test (PNDT) to determine the gender of an unborn child.
- State Government has announced incentive scheme for those 10 panchayats in the State, which showed the best female birth rate relative to male birth rate. These panchayats were awarded Rs. 5 lakh additional grant each year. According to government there are 156 ultra sound

machines in which 110 in non-Government and 46 in Government hospitals. Private Doctors involving in this sin will be black listed and registration will be cancelled.

Suggestions and recommendations:

Based on the findings, the following recommendations can be made:

- It is not easy to change overnight the attitude of even women towards female foeticide. Even if the women are prepared to understand and admit the need to change, the social situation and the family environment prevent them from doing so. Therefore, the need of the hours to change the mindset of the people by creating the awareness among the masses.
- The government has to make a plan throughout the country to have a close watch at pregnant women after the conceiving at least for four months.
- Movies, Nukkar nataks based on the inhuman process of murdering and elimination of girl foetus from the womb should be made and performed at every nook and corner of villages and local fairs to show people in general and family in particular in order to stop this practices.
- Self Help Groups, Block Samiti Members, Mahila Mandals, Education Institutions should be involved in propagating the positive attitudes towards girl child.
- At village level, health functionaries such as Auxiliary Nurse Midwives (ANM), Anganwadi Workers (AWs) and members of Panchayati Raj Institutions (PRIs) should to be involved in preventive strategies of female foeticide. As these stakeholders can maintain relevant demographic records and close association with local people, they can act as a crucial link in the implementation of the schemes meant to curb the evil.
- Incentives definitely affect behaviour changes and attitude of the women, therefore, more and more lucrative incentives should be offered to the couple having one or more than one girl child.
- Intensive awareness regarding laws relating to equal rights as regarding inheritance of parental property needs to be generated. This will ensure legal support to female and would also ensure eradication of social stigma of liability attached to girlhood and womanhood.

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Education pertaining to human values should be imparted in the schools. Children should be

taught to uphold morals, value and refrain from practices of dowry and female foeticide. The

vulnerable minds of the children should be so influenced that they grow up as adults who

consider practicing dowry and female foeticide as immoral.

In order to understand the socio- economic and psychological realities behind the disturbing

census figures, comparative case studies from different districts of Himachal Pradesh should be

made to raise the awareness level among masses thereby helping in minimizing female

foeticide.

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Government should also introduce schemes to promote free higher education for women along

with stipend in private schools and colleges. Special focus is required to promote education for

females willing to continue education even after marriage.

Government should provide an opportunity to girls not only to build a career but also to develop

their personality.

As a policy to encourage birth of girl child, the Government should extend financial support to

voluntary organizations, women's group and Self Help Groups (SHGs) to popularize and convey a

positive message about girl child in all states, in general and Himachal Pradesh in particular. All

available means of communication such as media, public lectures, poster campaigns,

exhibitions, films and publications need to be utilized.

Schemes promoting vocational training for skill development, employment and income

generating activities such as Support to Training & Employment Programme for Women may be

implemented more rigorously. This would help in improving the financial and decision making

power of women.

There is an urgent need to alter the demographic composition of India's population and to

tackle this brutal form of violence against women. The enactment of any law is not sufficient;

laws must be adhered to and applied rigorously, before any change in the status of the women

can take place.

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This paper concludes that decreasing sex ratio in Himachal Pradesh is raising an alarm as girls are

vanishing from the homes of hills. The decreasing sex ratio in hill state is not only due to the culture,

socio-economic factors but may also be due to advancement of latest medical technology, which has

created a serious problem of female foeticide. Majority of the respondents from female foeticide and

non female foeticide group were aware of sex selection test specifically ultrasound. There is a need to

change the mindset of the people and to generate awareness among them to shed the old beliefs, which

were responsible for such crimes. The concerned ministries, medical practitioners, education

departments, politicians, judiciary, police, NGOs media and the civil society as a whole have to own

responsibility to solve this shocking problem which has many dimensions and has to be looked from

various angles. There is a need of empirical studies to be conducted and that will help in formulating

further action plans.

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