

Original Research Article

A comparative study on women empowerment in urban and rural setting in Tamil Nadu

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ABSTRACT

Background: Women empowerment is vital for decision making on nutrition, health-seeking, family planning and economic issues for the family as a whole. In reality, there is prevalence of unequal gender norms among the women in India in urban and rural area. The objective of the study was to compare the empowerment of women in urban and rural setting in Tamil Nadu.

Methods: A cross-sectional study was conducted in Nandivaram (RHTC) and Shenoy Nagar (UHTC) attached to Government Kilpauk Medical College among 200 married women of age 15-49 years with a semi-structured questionnaire during June 2018. Data was entered and analyzed in SPSS 16. Chi Square test and logistic regression was used for statistical analysis.

Results: Mean age in rural group was 26.74 ± 6.45 years and 30.4 ± 7.35 in urban. Illiterates were 27% in rural and 14% in urban. About 67% were homemakers in rural vs. 43% in urban. About 33% were BPL in rural vs. 21% in urban. Decision making regarding household decisions, about 73% in rural vs. 87% urban had participated. In health seeking behavior, 77% in rural had no say while only 45% in urban. For Family planning, 33% in rural vs. 74% in urban had decision making which were statistically significant. Only 33% contributed to family income in rural vs. 47% in urban.

Conclusions: Women empowerment is better in urban setting than rural setting. There is a strong need to create awareness and training in rural setting for better productive life.

Keywords: Women empowerment, Rural, Urban, Tamil Nadu

INTRODUCTION

Empowerment of women is an active and multidimensional process enabling women to understand their full identity and potential in every sphere of life.¹ Empowerment is for the capacity of women to face the individual as well as the social facts of actual situation in life.¹ It is indeed essential to empower women in decision making for a healthier, progressive and constructive future of the family and the nation. Promotion of empowerment of women and gender equality is one of

the eight millennium developmental goals.² In reality, gender based inequalities exist in the society which leads to disempowerment of women which affects their health and their contribution to the development of the family. The health needs of the women are often ignored in the family and many suffer from spousal violence. Factors like lower access to education, employment as well as income play a role in disempowerment and this limits their participation in the decision making at the household level.³ The United Nations Development Programme has developed a gender empowerment

(GEM) focusing on three determinants to ensure the participation of women in society-political power for decision making, education and access to health.³ The empowerment of women and participation in decision making varies from state to state in our nation.⁴ This study aims to compare the participation of women in decision making and empowerment in domains like health and income of the family in rural and urban setting in Tamil Nadu.

METHODS

A community based cross-sectional study was conducted during June 2018 among the rural group in Nandivaram village in Kancheepuram, Rural Health training Centre and urban group in Shenoy Nagar (UHTC) attached to Government Kilpauk Medical College, Tamil Nadu. The study population comprised of women in reproductive age group (15-45 years) residing in the study area. Only married women in the study area who were willing to participate in this study were included. Sample size was estimated to be 200 in each group using the proportion of women taking part in household decision making reported as 84% in NFHS-4 for the state of Tamil Nadu with alpha 5, absolute precision of 6 and assuming 10% non-response rate.⁵ Using the sampling frame from family register maintained in the health Centre, simple random sampling method was used to conduct house to house survey to interview the women after the informed consent with a standardized semi-structured questionnaire developed from Women empowerment used in NFHS-4. Data was entered and analyzed using SPSS 16 version. Chi Square test and logistic regression were used for statistical analysis.

RESULTS

The mean age among the participants in the rural group was 26.74 ± 6.45 years and that in the urban group was 30.4 ± 7.35 years. Table 1 depicts the socio-demographic characteristics of the participants. Majority of women in both groups were educated up to high school level while 27% were illiterates in rural while 14% in urban group. The most common reason for school dropout was denial by parents and housework in both the groups followed by poverty in the family. About 67% were homemakers in rural group while 43% in urban wherein majority of them were willing to work but could not due to family responsibility of taking care of small children, elderly and due to household work. About 33% were below poverty line (BPL) in rural while 21% in urban were BPL. Age at marriage below 18 years was observed 23% in the rural group while 16% in the urban group. About 38% of women in rural group and 25% in urban group were not involved in the decision making related to their marriage. Table 2 depicts the participation of women in decision making regarding different aspects in their family life. About 73% of women had participated in making household decisions in the rural group while 87% had participated in the urban group and the difference

observed was statistically significant $p < 0.05$. Only 29% of women in rural group had a say in financial decisions in the family against 44% in the urban group which was statistically significant. About 33% of women had decided about the family planning in the rural group while 74% had participated in decision with regard to family planning. With respect to decision on health seeking, about 42% of women in rural group had a say while 68% of women in urban group which was statistically significant.

Table 1: Socio-demographic characteristics of the participants in both groups.

Characteristics	Rural group (n=200)	Urban group (n=200)
	N (%)	N (%)
Age at marriage		
<18 years	46 (23)	32 (16)
Type of family		
Nuclear	54 (27)	28 (14)
Joint	146 (73)	172 (86)
Religion		
Hindu	104 (52)	120 (60)
Christian	44 (22)	36 (18)
Muslim	24 (12)	44 (22)
Others	---	---
Educational status		
Illiterate	54 (27)	28 (14)
Primary school	10 (5)	26 (13)
Middle school	30 (15)	20 (10)
High school	106 (53)	114 (57)
Higher secondary	---	12 (6)
Graduation	---	---
Socio-economic status		
Upper	14 (7)	6 (3)
Middle	58 (29)	74 (37)
Lower	128 (64)	120 (60)
Occupation		
Unemployed	134 (67)	86 (43)
Employed	66 (33)	114 (57)

Age of the women had a role in their participation in household decisions. Older the age, the women had higher level of participation in decision making in both groups than the younger age group which was statistically significant $p < 0.001$. Factors like educational status, employment and awareness on empowerment were statistically significant that determine the difference between the empowerment among the women in rural and urban groups (Table 3). With regard to higher educational status, the level of participation in decision making improved among the women in urban group than the rural group. Employment increased the participation of women in decision making regarding household issues in urban group when compared to rural group with statistically significance. The concept of self-help group

and the income generated through this group had enabled women in both the groups to contribute to the family income and empower them in financial decisions. The prevalence of domestic violence was observed to be 26% in rural while 36% in urban group wherein the illiteracy and unemployment among the women played a major role in the experiencing some kind of domestic violence.

Table 2: Participation of women in decision making in both groups.

Domains	Rural (n=200) N (%)	Urban (n=200) N (%)
Household decisions (yes)	146 (73)	174 (87)
Decision about marriage (yes)	124 (62)	150 (75)
Financial decisions (yes)	58 (29)	88 (44)
Reproductive health (yes)	48 (24)	104 (52)
Decision of family planning	66 (33)	148 (74)
Health seeking behavior	84 (42)	136 (68)

P<0.01.

Table 3: Factors determining the difference in women empowerment in both groups.

Determinants	OR	CI
Age of the women	2.14	(1.453 – 3.164)
Educated women	3.08	(1.281 – 5.434)
Economic status	6.42	(4.252 – 9.711)
Employment	2.51	(1.714 – 3.687)
Awareness on empowerment	2.82	(1.918 – 4.148)

DISCUSSION

Empowerment of women involves the process of upliftment of social, economic and political status of women who are traditionally underprivileged in our male dominated society. In Western societies, the women enjoy equal rights and status with men in all aspects of life while gender disparities and discriminations are prevalent in India even today. This situation varies from state to state in our nation.⁴ The overall level of empowerment of women has improved to 84% as per NFHS4 in comparison to 78% as reported in NFHS 3 with regard to the state of Tamil Nadu.^{5,6} This study has shown that the empowerment of women is observed to be better in urban setting than the rural area in Tamil Nadu as reported by Sudha et al.¹ Overall empowerment of women in decision making with respect to household decisions, financial decisions, marriage, reproductive health, family planning and Health seeking behavior was observed to be better in urban setting than the rural setting in Tamil Nadu in this study.

Past studies in India have shown that the mean age at marriage in various parts of the nation is still less than 18 years.⁷ Age at marriage below 18 years was observed to be 23% of women in rural group in this study than 16% in the urban group which was influenced by lower level of education, unemployment and economic pressure in the family.⁸ Various studies have confirmed that women have limited access to knowledge, restricted control over resources and lower authority for independent decisions which leads to inequitable power relationship in their families.⁹ With regard to the decision making on the family planning and reproductive health, the women in urban setting had higher level of empowerment than the rural group in this study as reported in previous studies.^{9,10} Similar to the study reported by Sudha et al higher level of education and employment of women together led to increased participation of women in household, financial decisions in this study also.¹ Educated and employed women had increased awareness on the empowerment of women and the schemes offered by the Government for development of women in the nation. Other factors like older age of women, nature of joint family in India and area of residence like urban setting played a major role in increased empowerment of women in decision making process. The prevalence of domestic violence in this study was observed to be higher in urban group (36%) as against 26% in rural group as reported by Sudha et al.¹ Domestic violence is a violation of women's basic human rights. Overall prevalence of domestic violence in the state of Tamil Nadu has dropped from 41.9% as per NFHS 3 to 40% as reported by NFHS 4.^{5,6} Education, employment, contribution to the income of the family played a role in some protection against spousal violence in the family.¹¹ Thus better education, increased opportunities for employment and overall awareness in the society will aid in better empowerment of women in the society.¹²

Thus better education, awareness, better economic status and employment of women in urban setting has aided in better empowerment of women than the rural setting. Hence there is a strong need to improve the educational status, employment opportunities, awareness on the empowerment of women and the schemes offered by the Government in order to empower women for upliftment and development of our society.

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