

# Situational analysis of women empowerment in urban field practice area of Dr. M. K. Shah Medical College and Research Center, Ahmedabad

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### Abstract

**Introduction:** Women empowerment in society and family are closely linked to decision-making. Empowerment of women is essentially the process of upliftment of economic, social, and political status of women, the traditionally underprivileged ones, in society. It involves the building up of a society wherein women can breathe without the fear of oppression, exploitation, apprehension, discrimination, and the general feeling of persecution which goes with being a woman in a traditionally male dominated society. The present study was conducted to assess women's empowerment status and factors affecting it. **Material and Method:** Community-based cross-sectional study was carried out among 175 women residing in urban field practice area of Dr. M. K. Shah Medical College and Research Centre, Ahmedabad. A pre-designed questionnaire was used for data collection by interviewing the women through house to house survey. Data were entered in Microsoft Excel and analyzed using (Statistical Package for the Social Sciences (SPSS). **Result:** Around 85.71% of women were involved in decisions regarding trivial issues. A total of 17.72% of the women reported that they had suffered some form of domestic violence in their life. Around 23% of the women were not involved in any financial decisions of the family. Association between education of the women and involvement in decision-making was found statistically significant. Employment increases the participation of women in financial decisions. **Conclusion:** Education and employment were found to have impact on decision-making. So, education of girls should be given the priority.

**Keywords:** Domestic violence, empowerment, financial decision, situational analysis

# Introduction

Women empowerment is basically the creation of an environment where women can make independent decisions on their personal development as well as shine as equals in society. Promotion of gender equality and empowering women is one of the seventeen Sustainable Development Goals.<sup>[1]</sup> Women's empowerment occurs when they are involved in decision-making.

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Empowerment is essentially the process of raising the social, economic, and political status of woman.

The subject of the empowerment of women has become a burning issue in the last few decades. UNDP works to ensure that women have a real voice in governance institutions at all levels. The 73<sup>rd</sup> Amendment Act (1992) to the Constitution of India has provided for the reservation of seats in the local bodies of Panchayats and Municipalities for women.<sup>[2]</sup>

The role of a primary care physician in women's health is vital. Primary care doctors are often the first point of call for health care concerns and needs. This often opens a pathway to

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implement preventive health measures.<sup>[3]</sup> Women's empowerment is fundamental for realizing unalienable human rights and is vital for sustainable development outcomes. In India, the SWABHIMAAN intervention program was an integrated multi-sectoral strategy to improve girls' and women's nutrition before conception, during pregnancy, and after childbirth.<sup>[4]</sup>

Many women are motivated to make healthful changes, but they feel constrained by too many pressures—work, kids, and aging parents and that is also obstructed by not involving them in decision-making. Primary care physicians can play a pivotal role in enhancing the decision-making capacity and overall empowerment of women not only for improving their physical health but all aspects of their health. This can be achieved by direct counselling, with the women as well as their family members.

However, there still exists a wide gap between the goals enunciated in the Constitution, legislation, policies, plans, and programs on the one hand and the situational reality of the status of women in India on the other hand. In this backdrop, the present study was conducted to find out the quantum of participation of women in decisions affecting their own lives as well as that of their families.

# Aim and Objectives

#### Aim

To assess the level of empowerment of women.

### **Objectives**

To find out

- 1. Participation of women in decision-making.
- 2. Prevalence of domestic violence.
- 3. Association of catalyst factors (i.e., education and employment) with participation in decision-making and domestic violence.

# Methodology

A community-based cross-sectional study was conducted during September–October 2022 in the Urban Field Practice Area of Dr. M. K. Shah Medical College and Research Centre, Ahmedabad.

The study population comprised of married women of reproductive age group (15-49 years) residing in the study area. The sample size was estimated using the proportion of women taking part in household decision-making reported (91%) in NFHS V for Gujarat state.<sup>[5]</sup> With relative precision of 10%, the sample size was calculated by using the formula of 4pq/L<sup>2</sup>. By this calculation, sample size came to 175. The first household was randomly selected and then continued in consecutive houses until the required numbers of women were surveyed. Women were interviewed by a house-to-house survey after taking verbal consent from them.

A predesigned questionnaire was used for data collection. It includes socio-economic details as well as various factors regarding women's empowerment. Data were entered in Microsoft Excel and analyzed using Statistical Package for the Social Sciences (SPSS) version 24. Qualitative data are described as frequency and percentages and statistical association is found out by using Chi-square test among various variables. A P value less than 0.05 is considered statistically significant.

# Results

Almost half of the women were in the age group of 25–35 years. Similarly, more than half of the women were residing in joint/ three generation families. Majority of the women were Hindus. Around  $3/4^{th}$  of the women had reported their age of marriage between 18–24 years [Table 1].

Total of 14.57% women were not involved in the decision regarding their marriage. Remaining 85.43% were involved in some way but not fully in the decision of their marriage. Around 23% of the women were involved partially/completely in the financial decisions of the family. Rest of the women were not allowed in any form of financial decisions in their families. More than 85% of the women were involved in household decisions and in decisions about their own health [Figure 1].

When participation of women in household decisions was compared to the age, it was found that older women were more involved in household decisions compared to the younger women and this difference was not found statistically significant. Marked improvement in participation in household decisions was found with an increase in education. And this difference was found to be statistically significant. Employment was not found significantly associated with participation in household decision-making [Table 2].

With the increase in age and increase in educational status, participation of women in financial decisions was found

Table 1: Distribution of st	
Characteristics	Frequency (%)
Age (In years)	
15–25	48 (27.15)
25–35	82 (47.02)
35–49	45 (25.83)
Type of family	
Nuclear	82 (46.69)
Joint	30 (17.22)
Three Generation	63 (36.09)
Religion	
Hindu	159 (91.06)
Others	16 (8.94)
Age at marriage	
<18	16 (9 0.27)
18–24	135 (77.15)
>24	24 (13.58)

to be increased. Older age and higher education were found significantly associated with participation in financial decisions [Table 3].

Employment increases the participation of women in financial decision-making. 88.89% of employed women participated in financial decisions, while 71.42% of housewives participated in these decisions. The difference was statistically significant [Table 3].

Study subjects were asked about their experience of domestic violence at any time in their life. Around 1/6<sup>th</sup> of the women admitted said that they had experienced some form of domestic violence either physical/non-physical or both [Table 4].

We found that domestic violence is most prevalent in illiterate women compared to educated women. But this difference was not found statistically significant. Similarly, experience of domestic violence was found more in unemployed women compared to employed women. But this difference was also not found statistically significant [Table 4].

# Discussion

Our Indian society is traditionally patriarchal. Traditionally women are considered subordinate to men and incapable of making major decisions. The study of Kishore and Gupta<sup>[6]</sup> revealed that average women in India were disempowered relative to men, and there had been little change in her empowerment over time.

In this study, majority of women were found to have limited access to education. Education is referred to as one of the most important factors for the empowerment of an individual.<sup>[7]</sup> Less education leads to less opportunity for employment and early marriage. 9.27% of women got married before 18 years. In the present study, mean age at marriage was found to be 20.44 years. Past studies have shown that the mean age at marriage in various parts of India is still less than 18 years.<sup>[8]</sup>

Participation of women in family planning decisions in our study was 75.51%. A similar finding was observed in the study conducted in Jamnagar district showing 77.8% of study

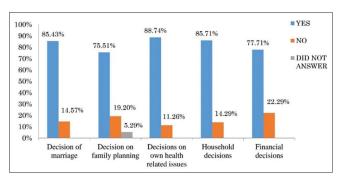


Figure 1: Decision-making power among study participants

participants were involved in family planning decisions.<sup>[9]</sup> In our study, 85.17% of women were involved in the household decisions. In contrast, our study conducted by Gautam<sup>[7]</sup> found that 48% of women have taken decision only sometimes in the household decision-making process in the household issues.

It was found that older women were more involved in decision-making. This may be due to the nature of the joint family system where wife of the head of a family has more decision-making power. A similar finding was observed in the study

Table 2: Participation of women in household decisions				
Variables	Household decision		Total (%)	$\chi^2$ and <b>P</b>
	Yes (%)	No (%)		
Age (in years)				
15-25	38 (79.16)	10 (20.84)	48 (27.15)	$\chi^2 = 1.99$ ,
25-35	72 (87.80)	10 (12.20)	82 (47.02)	P>0.05
35-49	40 (88.88)	5 (9.12)	45 (25.83)	
Education				
Illiterate	16 (66.66)	8 (33.34)	24 (13.58)	$\chi^2 = 10.29$ ,
Primary	60 (84.50)	11 (15.50)	71 (40.73)	P<0.05
Secondary	43 (91.48)	4 (8.52)	47 (26.82)	
>Secondary	31 (93.93)	2 (6.07)	33 (18.87)	
Occupation				
Working	57 (90.48)	6 (9.52)	63 (36.09)	$\chi^2 = 1.82$ ,
Non-working	93 (83.03)	19 (16.97)	112 (63.81)	P>0.05
Total	150 (85.71)	25 (14.29)	175 (100)	

Table 3: Participation of women in financial decisions				
Variables	Financial decisions		Total (%)	$\chi^2$ and $P$
	Yes (%)	No (%)		
Age (in years)				
15-25	33 (68.75)	15 (31.25)	48 (27.15)	$\chi^2 = 9.08$ ,
25-35	61 (74.39)	21 (25.61)	82 (47.02)	P<0.05
35-49	42 (93.33)	3 (6.67)	45 (25.83)	
Education				
Illiterate	14 (58.33)	10 (41.67)	24 (13.58)	$\chi^2 = 8.9$ ,
Primary	54 (76.06)	17 (23.94)	71 (40.73)	P<0.05
Secondary	38 (80.85)	9 (19.15)	47 (26.82)	
>Secondary	30 (90.90)	3 (9.10)	33 (18.87)	
Occupation				
Working	56 (88.89)	7 (11.11)	63 (36.09)	$\chi^2 = 7.09$ ,
Non-working	80 (71.42)	32 (28.58)	112 (63.81)	P<0.05
Total	136 (77.71)	39 (22.29)	175 (100)	

Table 4: Prevalence of domestic violence					
Variable	Domestic violence		Total (%)	$\chi^2$ and <b>P</b>	
	No (%)	Yes (%)			
Education					
Illiterate	16 (66.67)	8 (33.33)	24 (13.58)	$\chi^2 = 5.05$	
Primary	60 (84.51)	11 (15.49)	71 (40.73)	P>0.05	
Secondary	41 (87.23)	6 (12.77)	47 (26.82)		
>Secondary	27 (81.82)	6 (18.18)	33 (18.87)		
Occupation					
Working	55 (87.30)	8 (12.70)	63 (36.09)	$\chi^2 = 1.69$	
Non-working	89 (79.46)	23 (20.54)	112 (63.81)	<i>P</i> >0.05	
Total	144 (82.28)	31 (17.72)	175 (100)		

that was carried out in Jamnagar district.<sup>[9]</sup> Educated and working women were found to participate more in decision-making. There was a positive relationship between education and woman empowerment. Similar results were shown in a study conducted by Rathor.<sup>[10]</sup> This may be due to greater awareness of their rights and duties. There was a statistically significant difference between employment and financial decision. This study suggested that majority of working women were involved in any financial decision. A study conducted by Yadav *et al.*<sup>[9]</sup> found that employment leads to more financial decision-making power. Employment of women also favors financial savings. Access to livelihood and savings are critical to women's empowerment.<sup>[11]</sup>

Prevalence of domestic violence in Gujarat is 10% according to NFHS V.<sup>[5]</sup> In the present study, it was found to be 17.72%. Actual prevalence may be higher than this, as many of the women do not prefer to disclose their experience of violence. Employment was found to give some protection against violence, this may be due to the reason that employed women contribute to the family income and this ultimately increases the respect for women in the family. The study of Hazarika<sup>[12]</sup> concluded that in India women are discriminated and marginalized at every level of the society whether it is social participation, political participation, economic participation, access to education, and also reproductive healthcare. Women are found to be economically very poor all over India. A few women are engaged in services and other activities. So, they need economic power to stand on their own legs at par with men. In the research of Kumar and Kuncharam,<sup>[13]</sup> less empowerment among women makes them more vulnerable to crime. Therefore, determinants of women's empowerment should be strengthened to reduce crime against them. A study done by Singh et al.[14] found that total of 60.91% of rural and 51.46% of urban women reported that they had experienced domestic violence.

## **Summary and Conclusion**

More than 20% of the women were not involved in any financial decisions. Participation of women in other decision-making was found relatively good, but still there is scope for improvement. Education and employment were found to have an impact on decision-making. So, education of girls should be given priority and more and more opportunities for employment of women should be created and women should be encouraged for that.

In India, the situation for women and girls is getting better. Numerous efforts are being made by the Indian government to improve the status of girls. The education of girls is free through high school, and in the capital region in particular, the state government contributes financially to the rearing of girls from lower socioeconomic strata. Nevertheless, it is impossible to discuss women's empowerment when there is so much violence against them. The way society thinks and behaves needs to alter. A campaign to empower girls from the moment of their conception needs to get started.

#### Key messages

- Education and Employment should be given more emphasis.
- The five pillars of women's empowerment are:
  - a. Their sense of self-worth;
  - b. Their right to make and exercise choices;
  - c. Their access to opportunities and resources;
  - d. Their right to have the authority to manage their own lives, both inside and outside the home;
  - e. Their capacity to direct social change toward the development of a more just social and economic order, both domestically and globally.

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#### **Conflicts of interest**

There are no conflicts of interest.

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