MANY FACES OF GENDER INEQUALITY

An essay by Amartya Sen.

Nobel Laureate Amartya Sen's work on gender inequality is of seminal importance. His work on the theory of the household represents the household not as an undifferentiated unit, but as a unit of cooperation as well as of inequality and internal discrimination. He has worked on problems of discrimination against women in the development process, on survivorship differentials between men and women under conditions of social discrimination against women, and on women's agency in the process of social development. Along with his academic collaborator Jean Drze, Professor Sen proposed and popularised the concept of "missing women" - estimated to exceed 100 million round the world - which has given us a new way of understanding and mapping the problem.

In this Cover Story essay, which is based on the text of his inauguration lecture for the Radcliffe Institute at Harvard University, Professor Sen takes a comprehensive and deeply concerned look at the "many faces of gender inequality." Focussing on South Asia, he discovers in the data thrown up by the Census of 2001 an interesting phenomenon - a split India, "something of a social and cultural divide across India, splitting the country into two nearly contiguous halves, in the extent of anti-female bias in natality and post-natality mortality." He concludes by identifying the principal issues, emphasising the need to "take a plural view of gender inequality," and calling for a new agenda of action to combat and put an end to gender inequality.

Frontline features this important essay by Amartya Sen as its Cover Story.

I. Seven Types of Inequality

IT was more than a century ago, in 1870, that Queen Victoria wrote to Sir Theodore Martin complaining about "this mad, wicked folly of 'Woman's Rights'." The formidable empress certainly did not herself need any protection that the acknowledgment of women's rights might offer. Even at the age of eighty, in 1899, she could write to A.J. Balfour, "We are not interested in the possibilities of defeat; they do not exist." That, however, is not the way most people's lives go - reduced and defeated as they frequently are by adversities. And within each community, nationality and class, the burden of hardship often falls disproportionately on women.

The afflicted world in which we live is characterised by deeply unequal sharing of the burden of adversities between women and men. Gender inequality exists in most parts of the world, from Japan to Morocco, from Uzbekistan to the United States of America. However, inequality between women and men can take very many different forms. Indeed, gender inequality is not one homogeneous phenomenon, but a collection of disparate and interlinked problems. Let me illustrate with examples of different kinds of disparity.

(1) Mortality inequality: In some regions in the world, inequality between women and men directly involves matters of life and death, and takes the brutal form of unusually high mortality rates of women and a consequent preponderance of men in the total population, as opposed to the preponderance of women found in societies with little or no gender bias in health care and nutrition. Mortality inequality has been observed extensively in North Africa and in Asia, including China and South Asia.

(2) Natality inequality: Given a preference for boys over girls that many male-dominated societies have, gender inequality can manifest itself in the form of the parents wanting the newborn to be a boy rather than a girl. There was a time when this could be no more than a wish (a daydream or a nightmare, depending on one's perspective), but with the availability of modern techniques to determine the gender of the foetus, sex-selective abortion has become common in many countries. It is particularly prevalent in East Asia, in China and South Korea in particular, but also in Singapore and Taiwan, and it is beginning to emerge as a statistically significant phenomenon in India and South Asia as well. This is high-tech sexism.

(3) Basic facility inequality: Even when demographic characteristics do not show much or any anti-female bias, there are other ways in which women can have less than a square deal. Afghanistan may be the only country in the world the government of which is keen on actively excluding girls from schooling (it combines this with other features of massive gender inequality), but there are many countries in Asia and Africa, and also in Latin America, where girls have far less opportunity of schooling than boys do. There are other deficiencies in basic facilities available to women, varying from encouragement to cultivate one's natural talents to fair participation in rewarding social functions of the community.

(4) Special opportunity inequality: Even when there is relatively little difference in basic facilities including schooling, the opportunities of higher education may be far fewer for young women than for young men. Indeed, gender bias in higher education and professional training can be observed even in some of the richest countries in the world, in Europe and North America.

Sometimes this type of division has been based on the superficially innocuous idea that the respective "provinces" of men and women are just different. This thesis has been championed in different forms over the centuries, and has had much implicit as well as explicit following. It was presented with particular directness more than a hundred years before Queen Victoria's complaint about "woman's rights" by the Revd James Fordyce in his Sermons to Young Women (1766), a book which, as Mary Wollstonecraft noted in her A Vindication of the Rights of Women (1792), had been "long made a part of woman's library." Fordyce warned the young women, to whom his sermons were addressed, against "those masculine women that would plead for your sharing any part of their province with us," identifying

the province of men as including not only "war," but also "commerce, politics, exercises of strength and dexterity, abstract philosophy and all the abstruser sciences."[1] Even though such clear-cut beliefs about the provinces of men and women are now rather rare, nevertheless the presence of extensive gender asymmetry can be seen in many areas of education, training and professional work even in Europe and North America.

(5) Professional inequality: In terms of employment as well as promotion in work and occupation, women often face greater handicap than men. A country like Japan may be quite egalitarian in matters of demography or basic facilities, and even, to a great extent, in higher education, and yet progress to elevated levels of employment and occupation seems to be much more problematic for women than for men.

In the English television series called "Yes, Minister," there is an episode where the Minister, full of reforming zeal, is trying to find out from the immovable permanent secretary, Sir Humphrey, how many women are in really senior positions in the British civil service. Sir Humphrey says that it is very difficult to give an exact number; it would require a lot of investigation. The Minister is still insistent, and wants to know approximately how many women are there in these senior positions. To which Sir Humphrey finally replies, "Approximately, none."

(6) Ownership inequality: In many societies the ownership of property can also be very unequal. Even basic assets such as homes and land may be very asymmetrically shared. The absence of claims to property can not only reduce the voice of women, but also make it harder for women to enter and flourish in commercial, economic and even some social activities.[2] This type of inequality has existed in most parts of the world, though there are also local variations. For example, even though traditional property rights have favoured men in the bulk of India, in what is now the State of Kerala, there has been, for a long time, matrilineal inheritance for an influential part of the community, namely the Nairs.

(7) Household inequality: There are, often enough, basic inequalities in gender relations within the family or the household, which can take many different forms. Even in cases in which there are no overt signs of anti-female bias in, say, survival or son-preference or education, or even in promotion to higher executive positions, the family arrangements can be quite unequal in terms of sharing the burden of housework and child care. It is, for example, quite common in many societies to take it for granted that while men will naturally work outside the home, women could do it if and only if they could combine it with various inescapable and unequally shared household duties. This is sometimes called "division of labour," though women could be forgiven for seeing it as "accumulation of labour." The reach of this inequality includes not only unequal relations within the family, but also derivative inequalities in employment and recognition in the outside world. Also, the established fixity of this type of "division" or "accumulation" of labour

can also have far-reaching effects on the knowledge and understanding of different types of work in professional circles. When I first started working on gender inequality, in the 1970s, I remember being struck by the fact that the Handbook of Human Nutrition Requirement of the World Health Organisation (WHO), in presenting "calorie requirements" for different categories of people, chose to classify household work as "sedentary activity," requiring very little deployment of energy.[3] I was, however, not able to determine precisely how this remarkable bit of information had been collected by the patrician leaders of society.

II. Focussing on South Asia

It is important to take note of the variety of forms that gender inequality can take. First, inequality between women and men cannot be confronted and overcome by any one set of all-purpose remedy. Second, over time the same country can move from one type of gender inequality to harbouring other forms of that inequity. I shall presently argue that there is new evidence that India is undergoing just such a transformation right at this time. Third, the different forms of gender inequality can impose diverse adversities on the lives of men and boys, in addition to those of women and girls. In understanding the different aspects of the evil of gender inequality, we have to look beyond the predicament of women and examine the problems created for men as well by the asymmetric treatment of women. These causal connections, which (as I shall presently illustrate) can be very significant, can vary with the form of gender inequality. Finally, inequalities of different kinds can also, frequently enough, feed each other, and we have to be aware of their interlinkages.

Even though part of the object of this paper is to discuss the variety of different types of gender inequality, a substantial part of my empirical focus will, in fact, be on two of the most elementary kinds of gender inequality, namely, mortality inequality and natality inequality. I shall be concerned, in particular, with gender inequality in South Asia, or the Indian subcontinent. While I shall separate out the subcontinent for special attention, I must also warn against the smugness of thinking that the United States or Western Europe is free from gender bias simply because some of the empirical generalisations that can be made about the subcontinent would not hold in the West. Given the many faces of gender inequality, much would depend on which face we look at.

For example, India, along with Bangladesh, Pakistan and Sri Lanka, has had female heads of governments, which the United States or Japan has not yet had (and does not seem very likely to have in the immediate future, if I am any judge). Indeed, in the case of Bangladesh, where both the Prime Minister and the Leader of the Opposition are women, one might begin to wonder whether any man could possibly rise to a leadership position there in the near future. To take another

example, I had a vastly larger proportion of tenured women colleagues when I was a Professor at Delhi University - as early as the 1960s - than I had at Harvard University in the 1990s, or presently have at Trinity College, Cambridge. To take another type of example (of a rather personal kind), in preparing my last book, Development as Freedom,[4] when I was looking for a suitably early formulation of the contrast between the instrumental importance of income and wealth, on the one hand, and the intrinsic value of human life, on the other (a point of departure for my book), I found it in the words of Maitreyee, a woman intellectual depicted in the Upanishads (from the eighth century B.C.). The classic formulation of this distinction would, of course, come about four centuries later, from Aristotle, in Nicomachean Ethics, but it is interesting that the first sharp formulation of the value of living for men and women should have come from a woman thinker in a society that has not yet - three thousand years later - been able to overcome the mortality differential between women and men.

Indeed, in the scale of mortality inequality, India - as well as Pakistan and Bangladesh - is close to the bottom of the league in gender disparity. And, as I shall presently argue, natality inequality is also beginning to rear its ugly head very firmly and very fast right at this time in the subcontinent.

III. Exceptions and Trends

In the bulk of the subcontinent, with only a few exceptions (such as Sri Lanka and the State of Kerala in India), female mortality rates are very significantly higher than what could be expected given the mortality patterns of men (in the respective age groups). This type of gender inequality need not entail any conscious homicide, and it would be a mistake to try to explain this large phenomenon by invoking the occasional cases of female infanticide that are reported from China or India; these are truly dreadful events when they occur, but they are relatively rare. Rather, the mortality disadvantage of women works mainly through a widespread neglect of health, nutrition and other interests of women that influence survival.

It is sometimes presumed that there are more women than men in the world, since that is well-known to be the case in Europe and North America, which have a female to male ratio of 1.05 or so, on the average (that is, about 105 women per 100 men). But women do not outnumber men in the world as a whole; indeed there are only about 98 women per 100 men on the globe. This "shortfall" of women is most acute in Asia and North Africa. For example, the number of females per 100 males in the total population is 97 in Egypt and Iran, 95 in Bangladesh and Turkey, 94 in China, 93 in India and Pakistan, and 84 in Saudi Arabia (though the last ratio is considerably reduced by the presence of male migrant workers from elsewhere who come to Saudi Arabia).

It has been widely observed that given similar health care and nutrition, women tend typically to have lower age-specific mortality rates than men do. Indeed, even female foetuses tend to have a lower probability of miscarriage than male foetuses have. Everywhere in the world, more male babies are born than female babies (and an even higher proportion of male foetuses are conceived compared with female foetuses), but throughout their respective lives the proportion of males goes on falling as we move to higher and higher age groups, due to typically greater male mortality rates. The excess of females over males in the population of Europe and North America comes about as a result of this greater survival chance of females in different age groups.

However, in many parts of the world, women receive less attention and health care than men do, and particularly girls often receive very much less support than boys. As a result of this gender bias, the mortality rates of females often exceed those of males in these countries. The concept of "missing women" was devised to give some idea of the enormity of the phenomenon of women's adversity in mortality by focussing on the women who are simply not there, due to unusually high mortality compared with male mortality rates. The basic idea is to find some rough and ready way to understand the quantitative difference between (1) the actual number of women in these countries, and (2) the number we could expect to see if the gender pattern of mortality were similar in these countries as in other regions of the world that do not have a significant bias against women in terms of health care and other attentions relevant for survival.

For example, if we take the ratio of women to men in sub-Saharan Africa as the standard (there is relatively little bias against women in terms of health care, social status and mortality rates in sub-Saharan Africa, even though the absolute numbers are quite dreadful for both men and women), then its female-male ratio of 1.022 can be used to calculate the number of missing women in women-short countries.[5] For example, with India's female-male ratio of 0.93, there is a total difference of 9 per cent (of the male population) between that ratio and the standard used for comparison, namely, the sub-Saharan African ratio of 1.022. This yielded a figure of 37 million missing women already in 1986 (when I first did the estimation). Using the same sub-Saharan standard, China had 44 million missing women, and it was evident that for the world as a whole the magnitude of shortfall easily exceeded 100 million.[6] Other standards and different procedures can also be used, as has been done by Ansley Coale and Stephan Klasen, getting somewhat different numbers, but invariably very large ones (Klasen's total number is about 80 million missing women).[7] Gender bias in mortality does take an astonishingly heavy toll.

How can this be reversed? Some economic models have tended to relate the neglect of women to the lack of economic empowerment of women. While Ester Boserup, an early feminist economist, discussed how the status and standing of women are enhanced by economic independence (such as gainful employment),

others have tried to link the neglect of girls to the higher economic returns for the family from boys compared with girls.[8] I believe the former line of reasoning, which takes fuller note of social considerations that take us beyond any hard-headed calculation of relative returns from rearing girls vis-a-vis boys, is both appropriately broader and more promising, but no matter which interpretation is taken, women's gainful employment, especially in more rewarding occupations, clearly does play a role in improving the deal that women and girls get. And so does women's literacy, and other factors that can be seen as adding to the status, standing and voice of women in family decisions.[9]

An example that has been discussed in this context is the experience of the State of Kerala in India, which provides a sharp contrast with many other parts of the country in having little or no gender bias in mortality. Indeed, not only is the life expectancy of Kerala women at birth above 76 (compared with 70 for men), the female-male ratio of Kerala's population is 1.06 according to the 2001 Census (possibly somewhat raised by greater migration for work by men, but certainly no lower than the West European or North American ratios, which are around 1.05 or so). With its 30 million population, Kerala's example also involves a fair number of people. The causal variables related to women's empowerment can be seen as playing a role here, since Kerala has a very high level of women's literacy (nearly universal for the younger age groups), and also much more access for women to well paid and well respected jobs. One of the other influences of women's empowerment, namely a fertility decline, is also observed in Kerala, where the fertility rate has fallen very fast (much faster, incidentally, than China, despite the rigours of Chinese coercive measures in birth control), and Kerala's present fertility rate around 1.7 or 1.8 (roughly interpretable as an average of 1.7 or 1.8 children per couple) is one of the lowest in the developing world (about the same as in Britain and France, and much lower than in the United States). All these observations link with each other very well in a harmonious causal story.

However, there is further need for causal discrimination in interpreting Kerala's experience. There are other special features of Kerala which may also be relevant, such as female ownership of property for an influential part of the Hindu population (the Nairs), openness to and interaction with the outside world (with the presence of Christians - about a fifth of the population - who have been much longer in Kerala - since around the fourth century - than they have been in, say, Britain, not to mention Jews who came to Kerala shortly after the fall of Jerusalem), and activist left-wing politics with a particularly egalitarian commitment, which has tended to focus strongly on issues of equity (not only between classes and castes, but also between women and men).[10]

IV. Issues that Need Investigation

I now move away from the old - and by now much discussed - problems of gender bias in life and death (illustrated by the enormity of the size of "missing women") to other issues which are in need of greater investigation at this time. We begin by noting four substantial phenomena that happen to be quite widely observed in South Asia.

(1) Undernourishment of girls over boys: At the time of birth, girls are obviously no more nutritionally deprived than boys are, but this situation changes as society's unequal treatment takes over from nature's non-discrimination. There has, in fact, been plenty of aggregative evidence on this for quite some time now.[11] But this has been accompanied by some anthropological scepticism of the appropriateness of using aggregate statistics with pooled data from different regions to interpret the behaviour of individual families. However, there have also been some detailed and concretely local studies on this subject, which confirm the picture that emerges on the basis of aggregate statistics.[12] One case study from India, which I myself undertook in 1983, along with Sunil Sengupta, involved the weighing of every child in two large villages. The time pattern that emerged from this micro study, which concentrated particularly on weight-for-age as the chosen indicator of nutritional level for children under five, brings out clearly how an initial condition of broad nutritional symmetry turns gradually into a situation of significant female disadvantage.[13] The detailed local studies tend to confirm rather than contradict the picture that emerges from aggregate statistics.

In interpreting the causal process, it is important to emphasise that the lower level of nourishment of girls may not relate directly to their being underfed vis-a-vis boys. Often enough, the differences may particularly arise from the neglect of health care of girls compared with what boys get. There is, in fact, some direct information of comparative medical neglect of girls vis-a-vis boys in South Asia. Indeed, when I studied, with Jocelyn Kynch, admissions data from two large public hospitals in Bombay (Mumbai), it was very striking to find clear evidence that the admitted girls were typically more ill than boys, suggesting the inference that a girl has to be more stricken before she is taken to the hospital.[14] Undernourishment may well result from greater morbidity, which can adversely affect both the absorption of nutrients and the performance of bodily functions.

(2) High incidence of maternal undernourishment: In South Asia maternal undernutrition is more common than in most other regions of the world.[15] Comparisons of Body Mass Index (BMI), which is essentially a measure of weight for height, bring this out clearly enough, as do statistics of such consequential characteristics as the incidence of anaemia.[16]

(3) Prevalence of low birthweight: In South Asia, as many as 21 per cent of children are born clinically underweight (in accepted medical standards) - more than in any other substantial region in the world.[17]. The predicament of being low in weight in childhood seems often enough to begin at birth in the case of South

Asian children. In terms of weight for age, South Asia has around 40 to 60 per cent children undernourished compared with 20 to 40 per cent undernourishment even in sub-Saharan Africa. The children start deprived and stay deprived.

(4) High incidence of cardiovascular diseases: South Asia stands out as having more cardiovascular diseases than any other part of the third world. Even when other countries, such as China, have greater prevalence of the standard predisposing conditions, the Indian population seems to have more heart problems than these other countries have.

It is not difficult to see that the first three observations are very likely causally connected. The neglect of the care of girls and of women in general and the underlying gender bias that they reflect would tend to yield more maternal undernourishment, and through that more foetal deprivation and distress, underweight babies, and child undernourishment. But what about the last observation - the higher incidence of cardiovascular diseases among South Asian adults? In interpreting it, we can, I would argue, draw on some pioneering work of a British medical team, led by Professor D.J.P. Barker.[18]

Based on English data, Barker has shown that low birth weight is closely associated with higher incidence, many decades later, of several adult diseases, including hypertension, glucose intolerance, and other cardiovascular hazards. The robustness of the statistical connections as well as the causal mechanisms involved in intrauterine growth retardation can, of course, be further investigated, but as matters stand these medical findings offer a possibility of causally interconnecting the different empirical observations related to South Asia, as I have tried to discuss in a joint paper with Siddiq Osmani.[19] The application of this medical understanding to the phenomenon of high incidence of cardiovascular diseases in South Asia strongly suggests a causal pattern that goes from the nutritional neglect of women to maternal undernourishment, from there to foetal growth retardation and underweight babies, and thence to greater incidence of cardiovascular afflictions much later in adult life (along with the phenomenon of undernourished children in the shorter run). What begins as a neglect of the interests of women ends up causing adversities in the health and survival of all - even at an advanced age.

Given the uniquely critical role of women in the reproductive process, it would be hard to imagine that the deprivation to which women are subjected would not have some adverse impact on the lives of all - men as well as women and adults as well as children - who are "born of a woman" (as the Book of Job describes every person, not particularly daringly). Indeed, since men suffer disproportionately more from cardiovascular diseases, the suffering of women hit men even harder, in this respect. The extensive penalties of neglecting women's interests rebounds, it appears, on men with a vengeance.

V. What Women's Agency Can Achieve

These biological connections illustrate a more general point, to wit, gender inequality can hurt the interests of men as well as women. There are other - non-biological - connections that operate through women's conscious agency. The expansion of women's capabilities not only enhances women's own freedom and well-being, but also has many other effects on the lives of all.[20] An enhancement of women's active agency can, in many circumstances, contribute substantially to the lives of all people - men as well as women, children as well as adults. As many studies have brought out, the greater empowerment of women tends to reduce child neglect and mortality, cut down fertility and overcrowding, and more generally, broaden social concern and care.

These illustrations can be supplemented by considering the functioning of women in other areas, including in economic and political fields.[21] Substantial linkages between women's agency and social achievements have been noted in many different countries.

There is, for example, plenty of evidence that whenever social and economic arrangements depart from the standard practice of male ownership, women can seize business and economic initiative with much success. It is also clear that the result of women's participation is not merely to generate income for women, but also to provide many other social benefits that come from women's enhanced status and independence. The remarkable success of organisations like the Grameen Bank and the Bangladesh Rural Advancement Committee (BRAC) in Bangladesh is a good example of this, and there is some evidence that the high profile presence of women in social and political life in that country has drawn substantial support from women's economic involvement and from a changed image of the role of women. While the Revd James Fordyce might disapprove of "those masculine women," as he called them, straying into men's "province," the nature of modern Bangladesh reflects in many different ways the increasing agency of women. The precipitate fall of the total fertility rate in Bangladesh from 6.1 to 3.0 in the course of two decades (perhaps the fastest such fall in the world) is clearly related to the changed economic and social roles of women, along with increases in family planning facilities. There have also been cultural influences and developments in that direction.[22] Similar changes can be observed also in parts of India where women's empowerment has expanded, with more literacy and greater economic and social involvements outside the home.[23]

VI. Behind a Split India

While there is something to cheer in the developments I have just been discussing, and there is considerable evidence of a weakened hold of gender disparity in several fields in the subcontinent, there is also, alas, some evidence of a movement in the contrary direction, at least in one aspect of gender inequality, namely, natality inequality. This has been brought out particularly sharply by the early results of the 2001 decennial national Census of India, which are now available. Early results indicate that even though the overall female to male ratio has improved slightly for the country as a whole (with a corresponding reduction of the proportion of "missing women"), the female-male ratio for children has had a substantial decline. For India as a whole, the female-male ratio of the population under age 6 has fallen from 94.5 girls for hundred boys in 1991 to 92.7 girls per hundred boys in 2001. While there has been no such decline in some parts of the country (most notably Kerala), it has fallen very sharply in others, such as Punjab, Haryana, Gujarat and Maharashtra, which are among the richer Indian States.

Taking together all the evidence that exists, it is clear that this change reflects not a rise in female child mortality, but a fall in female births vis-a-vis male births, and is almost certainly connected with increased availability and use of gender determination of foetuses. Fearing that sex-selective abortion might occur in India, the Indian Parliament banned some years ago the use of sex determination techniques for foetuses, except when it is a by-product of other necessary medical investigation. But it appears that the enforcement of this law has been comprehensively neglected, and when questioned by Celia Dugger, the energetic correspondent of The New York Times, the police often cited difficulties in achieving successful prosecution thanks to the reluctance of mothers to give evidence of use of such techniques.

I do not believe that this need be an insurmountable difficulty (other types of evidence can in fact be used for prosecution), but the reluctance of the mothers to give evidence brings out perhaps the most disturbing aspect of this natality inequality, to wit, the "son preference" that many Indian mothers themselves seem to have. This face of gender inequality cannot, therefore, be removed, at least in the short run, by the enhancement of women's empowerment and agency, since that agency is itself an integral part of the cause of natality inequality. Policy initiatives have to take adequate note of the fact that the pattern of gender inequality seems to be shifting in India, right at this time, from mortality inequality (the female life expectancy at birth is by now two years higher than male life expectancy in India) to natality inequality.

Indeed, there is clear evidence that traditional routes of changing gender inequality, through using public policy to influence female education and female economic participation, may not serve as a path to the removal of natality inequality. A sharp pointer in that direction comes from countries in East Asia, which all have high levels of female education and economic participation. Despite these achievements, compared with the biologically common ratio across the world of 95

girls being born per hundred boys, Singapore and Taiwan have 92 girls, South Korea only 88, and China a mere 86. In fact, South Korea's overall female-male ratio for children is also a meagre 88 girls for 100 boys and China's 85 girls for 100 boys. In comparison, the Indian ratio of 92.7 girls for 100 boys (though lower than its previous figure of 94.5) still looks far less unfavourable.[24]

However, there are more grounds for concern than may be suggested by the current all-India average. First, there are substantial variations within India, and the all-India average hides the fact that there are States in India where the female-male ratio for children is very much lower than the Indian average. Second, it has to be asked whether with the spread of sex-selective abortion, India may catch up with - and perhaps even go beyond - Korea and China. There is, in fact, strong evidence that this is happening in a big way in parts of the country.

There is, however, something of a social and cultural divide across India, splitting the country into two nearly contiguous halves, in the extent of anti-female bias in natality and post-natality mortality. Since more boys are born than girls everywhere in the world, even without sex-specific abortion, we can use as a classificatory benchmark the female-male ratio among children in advanced industrial countries. The female-male ratio for the 0-5 age group is 94.8 in Germany, 95.0 in the U.K., and 95.7 in the U.S., and perhaps we can sensibly pick the German ratio of 94.8 as the cut-off point below which we should suspect anti-female intervention.

The use of this dividing line produces a remarkable geographical split of India. There are the States in the north and the west where the female-male ratio of children is consistently below the benchmark figure, led by Punjab, Haryana, Delhi and Gujarat (with ratios between 79.3 and 87.8), and also including, among others, Himachal Pradesh, Madhya Pradesh, Rajasthan, Uttar Pradesh, Maharashtra, Jammu and Kashmir, and Bihar (a tiny exception is Dadra and Nagar Haveli, with less than a quarter million people altogether). On the other side of the divide, the States in the east and the south tend to have female-male ratios that are above the benchmark line of 94.8 girls per 100 boys: with Kerala, Andhra Pradesh, West Bengal and Assam (each between 96.3 and 96.6), and also, among others, Orissa, Karnataka and the northeastern States to the east of Bangladesh (Meghalaya, Mizoram, Manipur, Nagaland, Arunachal Pradesh).

One significant exception to this neat pattern of adjoining division is, however, provided by Tamil Nadu, where the female-male ratio is just below 94, which is higher than the ratio of any State in the deficit list, but still just below the cut-off line used for the partitioning (94.8). The astonishing finding is not that one particular State seems to provide a marginal misfit, but how the vast majority of the Indian States fall firmly into two contiguous halves, classified broadly into the north and the west, on one side, and the south and the east, on the other. Indeed, every State in the north and the west (with the slight exception of the tiny Union Territory of Dadra and Nagar Haveli) has strictly lower female-male ratio of

children than every State in the east and the south (even Tamil Nadu fits into this classification), and this indeed is quite remarkable.

The pattern of female-male ratio of children produces a much sharper regional classification than does the female-male ratio of mortality of children, even though the two are also fairly strongly correlated. The female-male ratio in child mortality varies between 0.91 in West Bengal and 0.93 in Kerala, on one side, in the southern and eastern group, to 1.30 in Punjab, Haryana and Uttar Pradesh, with high ratios also in Gujarat, Bihar and Rajasthan, in the northern and western group.

The north and the west have clear characteristics of anti-female bias in a way that is not present - or at least not yet visible - in most of the east and the south. This contrast does not have any immediate economic explanation. The States with anti-female bias include rich ones (Punjab and Haryana) as well as poor States (Madhya Pradesh and Uttar Pradesh), and fast-growing States (Gujarat and Maharashtra) as well as growth failures (Bihar and Uttar Pradesh). Also, the incidence of sex-specific abortions cannot be explained by the availability of medical resources for determining the sex of the foetus: Kerala and West Bengal in the non-deficit list, both with the ratio of 96.3 girls to 100 boys (comfortably higher than the benchmark cut-off of 94.8), have at least as much medical facilities as in such deficit States as Madhya Pradesh or Rajasthan. If commercial facilities for sex-selected abortion are infrequent in Kerala or West Bengal, it is because of a low demand for those specific services, rather than any great supply side barrier.

This suggests that we have to look beyond economic resources or material prosperity or GNP growth into broadly cultural and social influences. There are a variety of potential connections to be considered here, and the linking of these demographic features with the rich subject matter of social anthropology and cultural studies would certainly be important to pursue.[25] There is perhaps a common link with politics as well. Indeed, it has been noted, in other contexts, that the States in the north and the west have, by and large, given much more room to religion-based sectarian politics than have the east or the south, where religion-centred parties have had very little success. For example, of the 197 members of Parliament from the Bharatiya Janata Party (BJP) and the Shiv Sena elected in 1999, as many 169 won from States in the north and the west. Even if we take out the BJP members who, though elected from Bihar or Madhya Pradesh, come from the recently formed relatively "eastern" States of Jharkhand and Chhatisgarh (which, incidentally, do have "eastern" female-male ratios above the benchmark line), the predominance of the north and the west in the representation of the Sangh Parivar remains strong. It is not easy to settle, without further scrutiny, how significant these regional, cultural or political associations are, and how (and even in which direction) the causal influences operate. But the remarkable geographical division of India into two largely contiguous parts in terms of female-male ratio among children (reflecting the combined influence of inequality in natality and post-natal mortality) does call for acknowledgement and

further analysis. It would also be important to keep a close watch on whether the incidence of sex-specific abortions will significantly increase in States in which they are at this time quite uncommon.

VII. Summing up

I may end by trying briefly to identify some of the principal issues I have tried to discuss. First, I have argued for the need to take a plural view of gender inequality, which can have many different faces. The prominent faces of gender injustice can vary from one region to another, and also from one period to the next.

Second, the effects of gender inequality, which can impoverish the lives of men as well as women, can be more fully understood by taking detailed empirical note of specific forms of inequality that can be found in particular regions. Gender inequality hurts the interests not only of girls and grown-up women, but also of boys and men, through biological connections (such as childhood undernourishment and cardiovascular diseases at later ages) and also through societal connections (including in politics and in economic and social life).

To have an adequate appreciation of the far-reaching effects of disparities between women and men, we have to recognise the basic fact that gender inequality is not one affliction, but many, with varying reach on the lives of women and men, and of girls and boys. There is also the need to reexamine and closely scrutinise some lessons that we have tended to draw from past empirical works. There are no good reasons to abandon the understanding that the impact of women's empowerment in enhancing the voice and influence of women does help to reduce gender inequality of many different kinds, and can also reduce the indirect penalties that men suffer from the subjugation of women. However, the growing phenomenon of natality inequality raises questions that are basically much more complex. When women in some regions themselves strongly prefer having boys to girls, the remedying of the consequent natality inequality calls at least for broader demands on women's agency, in addition to examining other possible influences.

Indeed, in dealing with the new - "high tech" - face of gender disparity, in the form of natality inequality, there is a need to go beyond just the agency of women, but to look also for more critical assessment of received values. When anti-female bias in action (such as sex-specific abortion) reflects the hold of traditional masculinist values from which mothers themselves may not be immune, what is needed is not just freedom of action but also freedom of thought - in women's ability and willingness to question received values. Informed and critical agency is important in combating inequality of every kind. Gender inequality, including its many faces, is no exception.

Based on the text of an inauguration lecture for the new Radcliffe Institute at Harvard University, on April 24, 2001. A shortened version of this paper was published in The New Republic *on September 17, 2001; this is the full text.*

ENDNOTES

1. See William St. Clair, The Godwins and the Shelleys (New York: Norton, 1989), pp. 504-8.

2. Bina Agarwal, among others, has investigated the far-reaching effects of landlessness of women in many agricultural economies; see particularly her A Field of One's Own (Cambridge: Cambridge University Press, 1994).

3. World Health Organisation, Handbook of Human Nutrition Requirement (Geneva: WHO, 1974); this was based on the report of a high-level Expert Committee jointly appointed by the WHO and FAO - the Food and Agriculture Organisation.

4. Development as Freedom (New York: Knopf, and Oxford: Oxford University Press, 1999), Chapter 1.

5. Presented in my "More Than a Hundred Million Women Are Missing," The New York Review of Books, Christmas Number, December 20, 1990, and in "Missing Women," British Medical Journal, 304 (March 1992).

6. The fact that I had used the sub-Saharan African ratio as the standard, rather than the European or North American ratio, was missed by some of my critics, who assumed (wrongly as it happens) that I was comparing the developing countries with advanced Western ones; see for example Ansley Coale, "Excess Female Mortality and the Balances of the Sexes in the Population: An Estimate of the Number of 'Missing Females'," Population and Development Review, 17 (1991). In fact, the estimation of "missing women" was based on the contrasts within the so-called third world, in particular between sub-Saharan Africa, on the one hand, and Asia and North Africa, on the other. The exact methods used were more elaborately discussed in my "Africa and India: What Do We Have to Learn from Each Other?," in Kenneth J. Arrow, ed., The Balance between Industry and Agriculture in Economic Development (London: Macmillan, 1988); and (with Jean Drze), Hunger and Public Action (Oxford: Clarendon Press, 1989).

7. Stephan Klasen, "'Missing Women' Reconsidered," World Development, 22 (1994).

8. See Ester Boserup, Women's Role in Economic Development (London: Allen & Unwin, 1970); M.R. Rosenzweig and T.P. Schultz, "Market Opportunities, Genetic Endowments, and Intrafamily Resource Distribution," American Economic Review, 72 (1982).

9. On this see my "Women and Cooperative Conflict," in Irene Tinker, Persistent Inequalities (New York: Oxford University Press, 1990). See also J.C. Caldwell, "Routes to Low Mortality in Poor Countries," Population and Development Review, 12 (1986); Jere Behrman and B.L. Wolfe, "How Does Mother's Schooling Affect Family Health, Nutrition, Medical Care Usage and Household Sanitation," Journal of Econometrics, 36 (1987); Jean Dreze and Amartya Sen, Hunger and Public Action (Oxford: Clarendon Press, 1989).

10. I have discussed these factors in my "More Than a Hundred Million Women Are Missing" (1990). See also Jean Dreze and Amartya Sen, India: Economic Development and Social Opportunity (Delhi: Oxford University Press, 1995), and particularly V.K. Ramachandran, "Kerala's Development Achievements," in Jean Dreze and Amartya Sen, eds., Indian Development: Selected Regional Perspectives (Delhi: Oxford University Press, 1996).

11. See the literature on this cited in Development as Freedom (1999).

12. One of the earliest and pioneering studies was by Lincoln Chen, E. Huq and S. D'Souza, "Sex Bias in the Family Allocation of Food and Health Care in Rural Bangladesh," Population and Development Review, 7 (1981).

13. See my joint paper with Sunil Sengupta, "Malnutrition of Rural Indian Children and the Sex Bias," Economic and Political Weekly, 19 (1983).

14. See my joint paper with Jocelyn Kynch, "Indian Women: Well-being and Survival," Cambridge Journal of Economics, 7 (1983), and also Resources, Values and Development (Cambridge, MA: Harvard University Press, 1984).

15. See Peter Svedberg, Poverty and Undernutrition: Theory and Measurement (Oxford: Clarendon Press, 2000), for an illuminating and thorough analysis of comparative nutrition in South Asia and sub-Saharan Africa.

16. See S.R. Osmani, "Poverty and Nutrition in South Asia," in ACC/SCN, Nutrition and Poverty (1997), and also Nutrition Policy Paper No. 16 (Geneva: WHO, 1997). This is the First Abraham Horowitz Lecture of the United Nations. See also the references to the literature cited by Osmani.

17. On this see Osmani, "Poverty and Nutrition in South Asia" (1997), and also the references cited there.

18. See D.J.P. Barker, "Intrauterine Growth Retardation and Adult Disease," Current Obstetrics and Gynaecology, 3 (1993); "Foetal Origins of Coronary Heart Disease," British Medical Journal, 311 (1995); Mothers, Babies and Diseases in Later Life (London: Churchill Livingstone, 1998). See also P.D. Gluckman, K.M. Godfrey, J.E. Harding, J.A. Owens, and J.S. Robinson, "Fetal Nutrition and Cardiovascular Disease in Adult Life," Lancet, 341 (1995).

19. Siddiq Osmani and Amartya Sen, "The Hidden Penalties of Gender Inequality: Fetal Origins of Ill-Health," mimeographed, Trinity College, Cambridge, 2001.

20. On the extensive role and reach of capabilities of women, see particularly Martha Nussbaum, Women and Human Development: The Capabilities Approach (Cambridge: Cambridge University Press, 2000).

21. UNDP's Human Development Report 1995 (New York: United Nations, forthcoming: 1995) presents an inter-country investigation of gender differences in social, political and business leadership, in addition to reporting on gender inequality in terms of more conventional indicators. See also Sudhir Anand and Amartya Sen, "Gender Inequality in

Human Development: Theories and Measurement," in UNDP, Background Papers: Human Development Report 1995 (New York: United Nations, 1996).

22. The complex influences that operate in fertility decline, including cultural adaptations, have been discussed by Alaka Basu and Sajeda Amin in "Conditioning Factors for Fertility Decline in Bengal: History, Language Identity, and Openness to Innovations," Population and Development Review, 26 (2000).

23. A recent study of local governmental decisions in India brings out the substantial nature of this change, as a consequence of women coming to occupy leadership positions in the "Panchayats" (local administrative bodies); see Raghabendra Chattopadhyay and Esther Duflo, "Women's Leadership and Policy Decisions: Evidence from a Nationwide Randomised Experiment in India," mimeographed, Department of Economics, MIT, 2001.

24. Note, however, that the Chinese and Korean figures cover children between 0 and 4, whereas the Indian figures relate to children between 0 and 6. However, even with appropriate age adjustment, the general comparison of female-male ratios holds in much the same way.

25. See, among other contributions, Irawati Karve, Kinship Organization in India (Bombay: Asia Publishing House, 1965); Pranab Bardhan, "On Life and Death Questions," Economic and Political Weekly, Special Number, 9 (1974); David Sopher, ed., An Exploration of India: Geographical, Perspectives on Society and Culture (Ithaca, NY: Cornell University Press, 1980); Barbara Miller, The Endangered Sex (Ithaca, NY: Cornell University Press, 1981); Tim Dyson and Mick Moore, "On Kinship Structure, Female Autonomy, and Demographic Behaviour in India," Population and Development Review, 9 (1983); Monica Das Gupta, "Selective Discrimination against Female Children in Rural Punjab," Population and Development Review, 13 (1987); Alaka M. Basu, Culture, the Status of Women and Demographic Behaviour (Oxford: Clarendon Press, 1992); Satish Balram Agnihotri, Sex Ratio Patterns in the Indian Population (New Delhi: Sage, 2000).