Gender Issues at the Local Level: Summary Results of a Pilot Survey in Bangladesh

Mustafa K. Mujeri*

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^{*} Project Leader, MIMAP-Bangladesh, Bangladesh Institute of Development Studies (BIDS), Dhaka. E-mail: mujeri@sdnbd.org

1. Survey Methodology and Implementation: A Brief Note

Under the MIMAP-Bangladesh Project, the Poverty Monitoring System covers a component to design and pilot test a Local Level Poverty Monitoring System (LLPMS) to collect relevant information for use in local level planning and development. This system is being implemented jointly by the Bangladesh Institute of Development Studies (BIDS) and the Bangladesh Academy for Rural Development (BARD) in active collaboration of the members of the *Union Parishad* and the villagers. For pilot testing, four villages – Bogair, Taltoli, Paruara, and Deokher – under Chowdhugram Upazila in Comilla district were selected.

In order to collect the data on identified indicators, household level survey and various techniques of Participatory Rural Appraisal (PRA) were employed (see Annexure 1 for list of indicators). The village level data were generated through a combination of different techniques like village transect, social mapping, resource mapping, wealth ranking, seasonal exercise, problem ranking, time line analysis, and focus group discussion. The collection of household level data was done using a pre-designed format specifically prepared for the purpose. The gender-related data were collected, wherever appropriate, by female field officers using specific questionnaire on participation in decision-making, violence, security, stress, and anxiety.

2. Major Findings and Summary Results

In this presentation, the preliminary results of the first round of the pilot survey are presented covering selected sex-disaggregated indicators.

2.1 Demographic Characteristics

The demographic characteristics of the survey population are presented in Table 1. The total number of households in the four villages is 545 with a population of 3,102 (females 1,501 and males 1,601). The average household size of 5.7 is somewhat higher than the national average in rural areas (5.2 in 2000). The sex-ratio is similar to the national ratio, estimated at around 106 in 2000. The age-sex structure of the population shows that the highest concentration exists in the age-group 30-64 in the case of males and 14-30 for females. The life cycle pattern of women reflects the relative deprivation during later stages in life. The share of females in total population in respective age groups significantly declines after the age of 30 years. Such a feature reflects the impacts of

cumulative deprivation of women: women begin their lives in a gender biased environment, spend their working life with a heavier work burden than men, and live shorter lives. Moreover, females are subjected to poverty in greater numbers: nearly 55 per cent of the females (5 years and above) and 62 per cent of the girl children (less than 5 years) belong to the poor households.

Table 1: Demographic Characteristics of Village Population

A. Household/Population Characteristics		
Number of households	545	
Number of people	3,102	
Male	1,601	
Female	1,501	
Average household size	5.7	
Sex-ratio (males per 100 females)	107	

B. Population Age Structure		ir	n per cent	
Age group (years)	Male	Female	Total	Share of female in total
0-5	16.8	18.5	17.6	50.7
6-10	12.7	14.7	13.6	52.0
10-14	11.2	11.7	11.4	49.4
14-30	26.0	28.6	27.4	50.8
30-64	27.8	22.4	25.2	43.1
65 and above	5.5	4.1	4.8	41.3
Total	100	100	100	48.4

Source: LLPMS Survey.

2.2 Poverty Incidence

Income Poverty

For measuring the incidence of poverty, four alternative methods have been used:

- A dietary survey of 24-hours recall method was used for identifying the poor on the basis of calorie intake. Under the method, individuals taking less than 2,122 K.cal per day were considered as poor while those taking less than 1,805 K.cal as 'very poor.'
- Under the second method, self-perception of the households in terms of meeting food requirements was used to categorize all households into four groups – chronic deficit, occasional deficit, breakeven, and surplus households. The

- households who identified them as chronic deficit and occasional deficit were considered as poor.
- The third method involved the categorization of the households by the villagers in terms of four groups the rich, the middle class, the poor, and the very poor.
- The fourth method used the costs of basic needs (CBN) approach under which the minimum consumption requirement to purchase a fixed bundle of food and nonfood basic needs was used as the cut-off point.

The percentage of the poor shows a significant degree of consistency among the four alternative poverty measures (Table 2). The highest incidence of poverty of 56 per cent is recorded for the CBN method while the lowest is 43 per cent for the direct calorie intake method. It may be mentioned here that the poverty incidence in rural areas of Bangladesh is 53 per cent according to the latest national level Household Income and Expenditure Survey (HIES) in 2000.

Table 2: Alternative Measures of Poverty

Method	Percentage of total population					
_	Po	or	Non	-poor		
	Poor	Very	Rich	Middle		
		Poor		Class		
Direct calorie intake method	21.9	21.3	56.8			
Self-perception in meeting food requirements	19.6	24.7	24.5	31.2		
Villager's perception	19.5	33.7	20.0	26.8		
Cost of basic needs method	56.1	•••	43.9	•••		

Source: LLPMS Survey.

In terms of gender and poverty, the female-headed households are more affected by poverty. Around four-fifths of the female-headed households are very poor compared with two-fifths of the male-headed households (Table 3). Considering the poor and the non-poor, nearly 88 per cent of the female-headed households are poor whereas 59 per cent of the male-headed ones are poor. Nearly 80 per cent of female-headed households live in extreme poverty.

Table 3: Poverty Incidence by Sex

(Per cent)

Sex of household head	Rich	Middle class	Poor	Very poor	Total
Male	17.3	23.6	21.0	38.1	100
Female	4.2	8.3	8.3	79.2	100

Source: LLPMS Survey.

Non-Income Dimensions of Poverty

In the case of non-income dimensions of poverty, literacy and enrolment rates have been discussed under education. The literacy rates are significantly lower for females across all groups indicating significant educational deprivation for females as well as for the disadvantaged population (Table 4). The alarming aspect, however, is the high dropout rate at both primary and secondary levels of girl children from poor families. The main reason for such high drop-out rates of the children from poor families is their inability to finance the education expenses and the compulsion to engage in income earning activities to supplement family income. One significant achievement, however, is the lower female drop out rate compared with the male drop out rate at all levels and for all groups due to the government's policy of supporting female education through stipend and Food for Education programmes.

Table 4: Educational Status and Access

			Poor				Non-poor		Total	
				Ver	y poor					
		Male	Female	Male	Female	Male	Female	Male	Female	
Α.	Literacy									
	Literacy rate	58.6	49.5	53.6	43.1	80.3	68.2	68.4	56.7	
	(7 years and above)									
	Literacy rate	42.3	28.7	34.7	22.4	75.3	55.6	58.6	39.8	
	(15 years and above)									
B.	Enrolment/									
	Dropout rates									
	Primary Level									
	Net enrolment rate	94.6	92.4	91.6	90.5	96.9	98.3	94.5	94.1	
	Drop-out rate	2.8	1.4	5.6	2.7	0	0	2.1	1.0	
	Secondary Level									
	Net enrolment rate	92.1	88.5	95.0	86.0	93.5	93.8	92.7	90.8	
	Drop-out rate	34.2	13.7	46.2	16.2	10.7	5.0	23.9	9.0	

Source: LLPMS Survey.

2.3 Employment and Income

In the survey, people belonging to age 15 years and above and involved in economic activities were considered as part of the civilian labour force. The female participation rate in the labour force is consistently lower for all groups compared to the male participation rate. There are differences between the poor and the non-poor households in terms of both female and male active labour (Table 5). In the case of labour force participation rate, however, the very poor households have the highest participation rate for both females and males. The compulsion of earning income for meeting the livelihoods, forces the poor and the very poor households to participate in the labour force in larger numbers instead of pursuing other activities like education.

Table 5: Employment Status: Un- and Underemployment Rates

		Poor		Non-	Total
	Poor	Very	Total	poor	
		poor			
A. Labour force participation rate (%)					
Female	75.3	78.0	76.7	71.9	74.7
Male	85.6	86.6	86.1	79.9	83.0
B. Average number of active labour per	househo	ld			
Female	1.0	1.0	1.0	1.3	1.1
Male	1.3	1.1	1.2	1.9	1.4
C. Unemployment rate (%)					
Female	9.5	4.9	7.2	6.2	6.3
Male	4.7	4.2	4.4	7.6	6.0
D. Underemployment rate (%)					
Female	13.8	12.1	13.0	9.3	11.2
Male	8.1	5.0	6.5	3.8	5.0

Source: LLPMS Survey.

Using the adopted definition in Bangladesh that a person working less than 15 hours and 35 hours during the preceding week is considered as unemployed and underemployed respectively, it is observed that the overall unemployment rate for women and men are very similar. In the case of female underemployment, the rate is highest for the poor households and lowest among the non-poor households. The labour force participants from the very poor households are usually forced to participate in any

available work opportunities for their sustenance and, therefore, reveal relatively low unand underemployment rates.

Seasonal Variation in Agricultural Employment and Wage Rates

There exist significant seasonal variabilities in employment opportunities of wage labourers in agriculture and wage rates which is related with the crop cycle. The femalemale wage rate exhibits significant differences: the average wage rate of a female labour is only one-third of the wage rate of a male labour.

Since the self-employment in household activities is the predominant occupation, 99 per cent of women reported such activities as the main occupation. The remaining women reported day labour and paid employment in community organizations as the major occupation. In addition, child rearing, preparation of food and all other household activities are considered as the sole responsibility of women across all household groups. The role of women in agriculture also remains largely invisible.

2.4 Organizational Involvement and Access to Credit

The involvement with development agencies (like NGOs and government programmes) is significantly higher for women than men. Such involvement is higher for the very poor and poor households indicating their better access to targeted programmes. Similarly, the access to credit from such organizations reflects the targeting toward the poor women although, in the case of skill training, women and men appear to benefit equally (Table 6). The incidence of child labour is relatively high, as expected, for the poor households and the problem is more acute for the male children.

Table 6: Involvement with Development Organizations

(Percentage of labour force)

		Poor	Non-	Total	
	Poor	Very poor	Total	poor	
A. Organizational involvement					_
Female	20.7	38.6	32.5	5.7	20.4
Male	4.7	2.9	3.6	4.0	3.8
B. Access to services					
I. Credit					
Female	24.2	42.2	36.0	6.5	22.7
Male	18.1	13.8	15.4	13.9	14.7

II. Skill training					
Female	4.3	2.7	3.2	5.4	4.2
Male	0.7	1.3	1.0	5.3	3.2
C. Child labour (Percentage of 6-					
14 years)					
Female	2.3	2.4	2.3	0.6	1.5
Male	5.1	11.2	9.0	5.7	7.6

Source: LLPMS Survey.

In the case of credit, a total of 841 persons reported access to credit indicating a ratio of 1.5 persons per household who had taken loans from different sources (Table 7). The members of the very poor households had the highest access (62 %) followed by the poor (18 %), middle class (17 %) and the rich (3 %).

Table 7: Sources of Credit

Source	Percentage of households taking credit									
		Poor						-poor	T	otal
	Po	Poor Very po		poor	T	otal				
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
NGOs	20.8	88.5	10.0	93.5	14.8	92.4	3.8	83.3	9.4	91.2
Money	45.8	3.8	50.0	1.1	48.1	1.7	30.8	5.6	39.6	2.2
lenders										
Banks	29.1	0	30.0	1.1	29.6	0.8	38.5	0	34.0	0.7
Women's	0	7.7	0	2.2	0	3.4	0	11.1	0	4.4
cooperatives										
Mortgage of	0	0	10.0	1.1	5.6	0.8	11.5	0	8.5	0.7
land/property										
Money	4.2	0	0	0	1.9	0	9.6	0	5.7	0
lenders										
and Banks										
Cooperatives	0	0	0	0	0	0	5.8	0	2.8	0
Money	0	0	0	1.1	0	0.8	0	0	0	0.7
lenders										
and NGOs										
Total	100	100	100	100	100	100	100	100	100	100

Source: LLPMS Survey.

The sources of credit are NGOs, informal money market, and formal banks. More than half of the borrowers (53 %) have taken loan from various NGOs like ASA, BRAC and *Grameen* Bank, of which more than 90 per cent are women. The NGOs are the most important source of credit for the very poor (71 %) and the poor (52 %) borrowers. The terms of credit vary widely over different sources. More than three per cent of the borrowers are observed to have taken loans from more than one sources.

2.5 Vulnerability, Crisis, and Crisis-Coping

The poor households faced more crisis with higher intensity and spill over effects than the relatively well-off ones (Table 8). The incidence of disease is higher in poor households than the wealthier ones.

Table 8: Nature and Incidence of Crisis

Nature of Crisis	ure of Crisis % of households experiencing						
_		Poor		Non-poor	Total		
	Poor	Very poor	Total	•			
Diseases	55.6	66.7	61.1	41.5	50.7		
Sent back from abroad	0	5.6	2.8	4.9	3.9		
Operations	5.6	0	2.8	2.4	2.6		
Litigations	5.6	0	2.8	4.9	3.9		
Dowry for marriage	5.6	5.6	5.6	12.2	9.1		
Expenses to go abroad	11.1	0	5.6	14.6	10.4		
Accidents	0	5.6	2.8	4.9	3.9		
Loss in business	16.7	11.1	13.9	9.8	11.7		
Destruction of	0	0	0	2.4	1.3		
dwellings							
Death of bovine	0	0	0	2.4	1.3		
animals							
Death of earning	0	5.6	2.8	0	1.3		
members							
Total	100	100	100	100	100		

Source: LLPMS Survey.

The households facing crisis adopted various measures to cope with the situation like taking loans from formal/informal sources and selling and/or mortgaging land and other assets.

2.6 Selected Indicators of Women's Profile

The housewives belonging to the non-poor households are older than their counterparts in the poor groups (Table 9). The average age at first marriage, however, is lower for housewives of non-poor households (15.8 years) than the similar age of females in poor households (16.4 years). It may be noted here that the minimum legal age of marriage for females in the country is 18 years.

Table 9: Average Age and Age at First Marriage

		Poor	Non-poor	Total	
	Poor	Very poor	Total		
A. Mean age (years)					
Wife	39.8	36.0	37.9	44.8	40.1
Husband	44.0	38.8	41.4	51.8	44.8
B. Age at first marriage (years)					
Female	16.5	16.4	16.4	15.8	16.2

Source: LLPMS Survey.

In terms of education, the large majority of the housewives are illiterate (Table 10). The educational status is significantly related to poverty situation of the households.

Table 10: Educational Status of Housewives

(Percentage of total)

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Educational Status		Poor		Non- poor	Total
	Poor	Very poor	Total		
Illiterate	66.7	82.2	74.5	64.7	72.6
Primary level (Grades 1-5)	15.2	8.2	11.7	12.7	11.3
Secondary level (Grades 6-10)	14.3	9.1	11.7	16.5	12.9
Secondary School Certificate	2.9	0.5	1.7	5.2	2.7
Higher Secondary Certificate	1.0	0	0.5	0.6	0.4
Graduation	0	0	0	0.4	0.2

Source: LLPMS Survey.

Although the incidence of diseases is very similar (13 % for females and 12 % for males), the disparity in treatment of illness between the females and the males is evident (Table 11). On average, treatment of females by 'unqualified doctors' (e.g. rural doctor, pharmacist, and *kobiraj*) constitutes 53 per cent compared to less than one-half for the males. Such disparity persists across all income groups irrespective of poverty status although the dependency of the poor households on unqualified doctors is more apparent.

Table 11: Types of Treatment Facilities

(Percentage of illness treated)

Type of			P	oor			Non	-poor	To	otal
facility	Poor		Very poor		Total		Male	Female	Male	Female
	Male	Female	Male	Female	Male	Female				
Rural doctor	27.6	60.7	33.3	23.5	31.0	40.3	14.7	20.3	23.0	29.8
Pharmacist	20.7	17.9	35.7	20.6	29.6	19.4	17.7	14.5	23.7	16.8
Private doctor	27.6	3.6	11.9	20.6	18.3	12.9	27.9	36.2	23.0	25.1
Homeopath	3.5	0	2.4	0	2.8	0	1.5	0	2.2	0
Private clinic	17.1	7.1	14.3	14.7	15.5	11.3	32.4	21.7	23.7	16.8
Hospital	0	0	0	5.9	0	3.1	1.4	1.5	0.8	2.3
Kobiraj	0	3.6	2.4	8.8	1.4	6.5	4.4	5.8	2.9	6.1
Not treated	3.5	7.1	0	5.9	1.4	6.5	0	0	0.7	3.1
Total	100	100	100	100	100	100	100	100	100	100

Source:

LLPMS Survey.

2.7 Participation in Decision-Making

Women's participation in decision-making, even within the households, is limited. This is particularly true in the case of economic and production decisions.

Economic Decisions

In terms of participation in economic decision-making, several aspects are considered like choice of crop production, expenditure of earned income by females, receiving and/or providing credit, investment of credit funds, involvement in NGOs, purchase of essential items, sale of produced crops, and purchase of daily necessities (Table 12). The general pattern that emerges from the results points out the overwhelming dominance of husbands in economic decision-making within the households. On the other hand, women's role is restricted mostly within their own affairs. Even in such cases like spending earned income and involving in NGO activities, only around one-half of the women are able to take decisions by themselves.

Table 12: Involvement in Household Economic Decisions

(Percentage of involved households)

			Poor		Non-	Total
		Poor	Very	Total	poor	
			poor			
Husband alone	Choice of crop cultivation	78.1	65.9	73.2	66.3	68.9
	Expenditure of female's earned income	5.3	7.8	7.0	3.1	5.3
	Receiving/providing credit	68.4	59.9	62.7	71.0	66.1
	Investment of credit fund	70.1	68.0	68.7	71.2	69.7
	Involvement in NGOs	8.7	3.2	4.7	13.3	6.9
	Purchase of essential items	10.6	16.3	14.3	11.2	13.1
	Sale of produced crops	56.5	27.3	44.3	54.7	51.4
	Purchase of daily necessities	24.1	26.3	25.6	18.8	22.9
Wife alone	Choice of crop production	9.4	20.5	13.9	12.7	13.2
	Expenditure of female's earned income	40.8	44.8	43.5	62.2	51.3
	Receiving/providing credit	11.8	17.8	15.8	7.1	12.3
	Investment of credit fund	10.4	10.0	10.1	4.6	7.9
	Involvement in NGOs	39.1	61.9	55.8	53.3	55.2
	Purchase of essential items	5.8	9.9	8.5	5.9	7.4
	Sale of produced crops	8.7	15.2	11.4	7.7	8.8
	Purchase of daily necessities	7.7	7.3	7.4	5.8	6.8
Joint decision of	Choice of crop production	7.8	6.8	7.4	12.2	10.4
wife and husband	Expenditure of female's earned income	51.3	43.5	46.1	31.7	40.1
	Receiving/providing credit	15.8	19.1	18.0	11.6	15.4
	Investment of credit fund	16.9	18.0	17.6	12.4	15.5
	Involvement in NGOs	47.8	28.6	33.7	23.3	31.0
	Purchase of essential items	78.9	70.4	73.3	71.2	72.5
	Sale of produced crops	32.6	42.4	36.7	30.0	32.1
	Purchase of daily necessities	63.5	62.9	63.1	63.3	63.2
Wife in	Choice of crop production	4.7	6.8	5.6	8.8	7.6
consultation with other members	Expenditure of female's earned income	2.6	3.9	3.5	3.1	3.3
	Receiving/providing credit	4.0	3.3	3.5	10.3	6.3
	Investment of credit fund	2.6	4.0	3.5	11.8	6.8
	Involvement in NGOs	4.4	6.4	5.8	10.0	6.9
	Purchase of essential items	4.8	3.5	3.9	11.7	7.0
	Sale of produced crops	2.2	15.2	7.6	7.7	7.6
	Purchase of daily necessities	4.8	3.4	3.9	12.1	7.2

Source: LLPMS Survey.

Other Household Decisions

The independent decision-making status of women is apparent in child's immunization alone (Table 13). The decisions regarding the adoption of family planning and marriages are mostly taken jointly although the opinion of the husband always has the upper edge. There is no significant variation in women's status across different income levels in decision-making.

Table 13: Participation in Household Decisions

(Percentage of involved households)

			Poor		Non- poor	Total
		Poor	Very poor	Total		
Husband alone	Children's education	73.5	64.8	67.9	70.0	68.8
	Treatment during illness	68.5	66.5	67.2	60.0	64.3
	Purchase of cloths	56.2	53.1	54.2	51.9	53.3
	Repair of houses	62.1	55.8	57.9	57.0	57.6
	Adoption of family planning	0	0.9	0.6	0.9	0.7
	Immunization	4.2	1.6	2.6	2.8	2.7
	Marriage	8.1	5.0	6.2	0.9	3.5
Wife alone	Children's education	11.8	20.8	17.6	8.0	13.4
	Treatment during illness	12.4	10.8	11.3	12.6	11.8
	Purchase of cloths	9.5	10.6	10.3	11.5	10.8
	Repair of houses	7.8	10.2	9.4	8.7	9.1
	Adoption of family planning	3.2	1.8	2.3	0	1.4
	Immunization	83.1	84.4	83.9	60.6	75.5
	Marriage	0	8.3	5.2	0.9	3.0
Joint decision of	Children's education	8.8	8.8	8.8	12.0	10.2
wife and husband	Treatment during illness	10.1	17.4	14.8	13.7	14.4
	Purchase of cloths	25.7	31.9	29.8	26.4	28.5
	Repair of houses	26.2	29.6	28.5	25.6	27.3
	Adoption of family planning	96.8	97.4	97.2	98.1	97.5
	Immunization	1.4	0.8	1.0	4.6	2.3
	Marriage	89.2	81.7	84.5	95.3	90.2
Wife in	Children's education	5.9	5.6	5.7	10.0	7.6
consultation with other members	Treatment during illness	9.0	5.4	6.6	13.7	9.5
	Purchase of cloths	8.6	4.4	5.8	10.1	7.5
	Repair of houses	3.9	4.4	4.2	8.7	6.0
	Adoption of family planning	0	0	0	0.9	0.4
	Immunization	11.3	13.1	12.4	32.1	19.5
	Marriage	2.7	5.0	4.1	2.8	3.5

Source:

LLPMS Survey.

2.8 Gender and Mental Health: Insecurity, Violence, and Anxiety

The economic security of women is extremely low in the absence of ownership of assets and access to income. Some ownership rights to land is held by only 5 per cent of the women of the households who have land. Most of the lands are held by husbands and, in this respect, the poor women are specially disadvantaged (Table 14).

The social insecurity of women within the household leads to threats. The non-cooperation and non-assistance by the village community, neighbours and guardians in

case of violence and physical assault by the husbands make them vulnerable, preclude them from getting justice and avoid further brutality.

Table 14: Some Aspects of Women's Insecurity

(Percentage of housewives)

	(Percentage of house				isewives)
		Poor		Non- poor	Total
	Poor	Very poor	Total		
A. Economic insecurity					
Rights to land	1.9	3.4	2.9	8.2	5.0
Access to income	27.6	35.1	32.6	29.5	31.4
Right to spend own income	32.4	33.2	32.9	31.9	32.5
B. Social insecurity					
Subjected to threat of second marriage by husbands due to birth of female child alone	1.9	5.8	4.5	0.5	2.9
Subjected to threat of divorce by husbands	4.8	7.3	6.4	1.5	4.4
Subjected to threat by others outside home	1.9	1.0	1.3	1.0	1.2
Insecurity among households who have adolescent girls	98.1	99.5	99.0	99.5	99.2
Neighbour's non-cooperation in getting justice against violence	33.3	5.7	11.4	16.7	12.0
Non-assistance of village community in getting justice against husband's physical assault	85.7	85.7	85.7	83.3	85.4
Non-assistance of guardians in getting justice against husband's physical assault	28.6	14.3	16.7	0	14.6

Source:

LLPMS Survey.

Violence against Women

The violence against women within the household is a reflection of discrimination, low economic power, socio-cultural attitude, and a host of other factors. Usually, women are reluctant to express the incidence of violence by husbands, particularly in the traditional rural society. It is likely, therefore, that the quantitative information on violence, given in Table 15, is likely to contain a downward bias due to under-reporting of such cases. In general, women from poor households experience more violence than women from non-poor ones. Often these are related to taking control of women's savings and fetching dowry from the wife's parents.

Table 15: Violence against Women at Household Level

(Percentage of women)

	(Perc			emage of	(women)
		Poor		Non- poor	Total
	Poor	Very poor	Total		
A. Incidence of Violence					
Verbal abuse by husbands	20.0	35.1	30.0	10.1	22.1
Physical assault by husbands	8.6	19.2	15.7	2.9	10.6
B. Causes of Violence					
I. Verbal abuse					
Delays in cooking & household work	7.2	24.5	20.9	41.7	24.1
Quarrel	21.4	17.0	17.9	0	15.2
Behaviour of children	7.1	5.7	6.0	16.7	7.6
Disagreement with husband's opinion	64.3	52.8	55.2	33.3	51.8
No apparent cause	0	0	0	8.3	1.3
II. Physical assault					
Delays in cooking & household work	14.3	23.7	21.7	33.3	23.1
Quarrel	57.1	34.2	37.0	16.7	34.6
Behaviour of children	0	5.3	4.4	16.7	5.8
Disagreement with husband's opinion	28.6	34.2	32.6	33.3	32.7
No apparent cause	0	2.6	2.2	0	1.9

Source:

LLPMS Survey.

State of Mental Health

The state of mental health is the outcome of interactions of various factors, both economic and non-economic, and reflects the well-being of a person that are complex to measure. In the study, five questions of the General Health Questionnaire (GHQ) have been used to generate the information on the perception of changes in the level of anxiety and feeling of happiness of different groups of households differentiated on the basis of status of poverty. The indicators have been developed under the MIMAP Gender Network Project. The module on alcoholism was not administered since this is not relevant in the predominant Muslim society in the villages. The male-female distinction based on the perceptions of wives and husbands has also been captured. The results in terms of the indicators are summarized in Table 16. In terms of percentages, males are more affected than females for all indicators.

Table 16: State of General Health

(Percentage of total husbands/wives)

State	Non-poor	Poor	Very poor	Total
A. Losing sleep over worry				
Male	31.9	49.0	65.3	48.5
Female	21.0	34.9	37.5	30.3
B. Feeling of constant strain				
Male	29.9	48.0	64.8	47.3
Female	14.3	15.1	13.5	14.1
C. Inability to enjoy normal daily				
activities				
Male	31.4	49.0	64.8	48.1
Female	20.5	32.1	36.5	29.2
D. Recent feeling of unhappiness				
and depression				
Male	23.1	40.2	54.3	38.8
Female	15.3	16.0	13.5	14.7
E. Overall feeling of unhappiness				
considering all things				
Male	31.9	49.0	66.2	48.8
Female	22.4	37.7	39.9	32.5

Note: The results are based on a four-point scale of perception with normal, usual, more/less than usual and much more/less than usual categorization. The figures provide the percentages of the last two (more/less and much more/less than usual) categories.

Source: LLPMS Survey.

In terms of feeling of constant strain, inability to enjoy normal daily activities and feelings of unhappiness and depression, men are more affected than women. In terms of poverty, the pattern is clear: the incidence of anxiety and unhappiness is positively related with the intensity of poverty. Greater percentages of women and men of the very poor households are subjected to such stress relative to those in poor and non-poor households. This indicates that the incidence of poverty is a significant factor that contributes to anxiety and unhappiness among both women and men. The scores, computed on the basis of a simple weighing system, are given in Table 17. The scores for all groups (for both men and women) are less than the cutting score of 2 and above which may be considered as indicative of psychiatric illness, the significant stress, particularly of those living in extreme poverty, is a matter of concern.

Table 17: Scores of Anxiety and Unhappiness

		Non-poor	Poor	Very poor	Total
A.	Losing sleep over worry				
	Male	0.32	0.49	0.65	0.49
	Female	0.21	0.35	0.38	0.30
В.	Feeling of constant strain				
	Male	0.30	0.48	0.65	0.47
	Female	0.14	0.15	0.14	0.14
C.	Inability to enjoy normal daily				
	activities				
	Male	0.31	0.49	0.65	0.48
	Female	0.20	0.32	0.37	0.29
D.	Recent feeling of unhappiness				
	and depression				
	Male	0.23	0.41	0.54	0.39
	Female	0.15	0.16	0.14	0.15
E.	Overall feeling of unhappiness				
	considering all things				
	Male	0.32	0.49	0.66	0.49
	Female	0.22	0.38	0.40	0.32

Note: The figures indicate the average values. The scores are zero for normal and usual and one for more/less than usual and much more/less than usual.

Source: LLPMS Survey.

3. Concluding Remarks

The study suggests the need to identify the 'processes' which create impact on women's lives including basic survival needs, well-being, security, and autonomy. This would help to provide appropriate entry points to build up management and other skills among women leading to their asset creation on a sustained basis and closing the gaps with the mainstream social, political and economic institutions and challenge the deeply held prejudices against the rural women.

Annexure 1: List of Indicators*

Broad Area	Indicators
Village/Household Characteristics	Number of households/population; Religious status; Number of female-headed households, In- and out-migration; Population by age group; Households by number of members; Number of widows/working children, disabled persons; Housing characteristics and access to electricity; Distance from nearest (i) <i>pucca</i> road, (ii) primary school/secondary school/college;
Education	Number of illiterate adults, children not going to school, schools and school enrolment, persons attaining literacy through adult literacy programmes.
Health and Sanitation	Sources of drinking water and for other household needs; Extent of arsenic contamination in tube well water; nature of sanitation facilities.
Mortality and Morbidity	Number of deaths; Maternal mortality; Incidence of major diseases; Treatment facilities.
Participation in Local Level Institutions	Number of Union Parishad members, NGO members, members in other committees.
Agriculture and Environment	Land ownership pattern, land utilization.
Labour and Wages	Number of wage labourers; Major occupation; Wage rates by season; Non-farm activities.
Access to Credit	Number of borrowers by sources.
Food Security	Number of households with adequate access to food by months.
Access to Market	Commodities transacted by types of market/buyers.
Crisis and Crisis Coping Capacity	Type of crisis faced by households and mitigating measures adopted.
Perception of Poverty	Self classification of poverty status and socio-economic characteristics.
Geographical Characteristics	Physical and land characteristics.
Land and Population	Land utilization, activity status and employment characteristics of population, land holding characteristics and input use.

Broad Area	Indicators
Livestock, Forests and Water Resources	Livestock population and productivity, animal health and feed sources, forest resources and forestation programmes, water sources and utilization.
Non-agricultural Activities	Small/cottage industries, sources of raw materials, local resource base.
Education, Health and Social Development	Literacy and enrolment/dropout rates, Number of health centres and health services accessed, Number of trained doctors, special programmes.
Infrastructure and Communication	Availability of different services, transportation facilities, Ownership of radio/television.
Marketing Linkages	Market centres, nature of commodity flows and marketing intermediaries, storage facilities, cooperatives, prices of major commodities.
Development Priorities and Prospects	Agriculture, livestock, forestry, Non-farm activities, infrastructure, education, health, income generation, women and social development, information and communication facilities.

• Wherever appropriate, the indicators have been disaggregated in terms of gender, age, religion and similar other soico-cultural characteristics.