



## **A Review On Women Empowerment Of Women In Varanasi District Of Utter Pradesh**

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### **ABSTRACT:**

*Empowering women is the key to strengthening their involvement in decision-making, which is the most crucial key to socio-economic development. Empowering women is the key to strengthening their participation. Building a culture and a political climate in which women are able to breathe freely without the worry of being oppressed, exploited, apprehensive, or discriminated against is an essential component of women's empowerment. Given that women are the ones who are responsible for bearing children and are often the main carers in homes, this should not come as a surprise. When it comes to supporting change in reproductive attitudes and behaviours, particularly in countries that are patriarchal, it is thus essential to have a knowledge of the position of women in society as well as their empowerment inside their own families. In order to determine the current state of women's empowerment in rural parts of the Varanasi district, the purpose of the research is an investigation. The sample size for this research was 523, and it was a cross-sectional study that was carried out in rural regions of the Varanasi district in Uttar Pradesh. The participants were women of reproductive age who were between the ages of 15 and 49. The acquisition of fundamental information about respondents was accomplished via the use of a pre-tested and planned interview schedule. The state of women's empowerment was evaluated with the use of a scale called the Women Empowerment Scale. Sixty percent of women are empowered in terms of mobility, and seventy-seven percent of women are free from the dominance of their families, according to the findings of the survey. The percentage of women who felt empowered in terms of economic security was just twenty percent when we speak about economic security. Among the responders, just sixteen percent made a financial contribution to her family's costs. In terms of decision-making, the percentage of women who make decisions only in the context of the home is quite low. About fifteen percent of women were free to relocate their family or friends without permission, and only thirty-three percent of women were free to make decisions about their own health on their own. In order to broaden women's access to resources and their capacity to make strategic decisions in their lives, women's empowerment provides the essential tool. Empowering women is the key to strengthening their involvement in decision-making, which is the most crucial key to socio-economic*

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*development. Empowering women is the key to strengthening their participation. Initiatives taken by the government on its own would not be adequate to accomplish this objective. To establish a climate in which there is no discrimination based on gender and in which women are given full opportunity to make their own decisions and to participate in social, political, and economic life with a feeling of equality, society must take the initiative to create such an environment.*

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**Keywords:** *Women Empowerment, Women's Decision-Making Ability, Women's Mobility, Freedom from family domination, Economic Security.*

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**INTRODUCTION:**

Not only at the national level, but also at the worldwide level, the empowerment of women has emerged as one of the most significant problems of the 21st century. In order to improve women's involvement in decision-making, which is the most crucial key to socio-economic development, their empowerment is the key to strengthening their participation. However, in practice, the empowerment of women is still a fiction that exists in the world. In the course of our daily lives, we are able to see how women are victimised by a variety of societal immoralities. In order to broaden women's access to resources and their capacity to make strategic decisions in their lives, women's empowerment provides the essential tool. In its most fundamental form, the empowerment of women refers to the process of elevating the economic, social, and political position of women, who have long been considered to be the most disadvantaged members of society. Despite the fact that women make up over half of the world's population,

India has developed a disproportionate gender ratio, in which the number of females in the country is much fewer than the number of males. As far as their social position is concerned, females are not regarded in the same manner as men in all of the areas.

Programmes that seek to improve mother and child health as well as achieve other demographic objectives primarily focus on women as their primary target population. Considering that women are the ones who are responsible for bearing children and are often the main carers in homes, this should not come as a surprise. It is also essential to have an awareness of the position of women in society as well as their empowerment inside their homes in order to promote change in reproductive attitudes and behaviours, particularly in countries that are patriarchal (Dyson and Moore, 1983) [1]. Particularly noteworthy is the fact that the National Population Policy 2000 clearly mentioned the low status of women in India as a significant impediment to the fulfilment of population and maternity and child care

objectives (Ministry of Health and Family care, 2000). Initiatives taken by the government on its own would not be adequate to accomplish this objective. Creating an environment in which there is no discrimination based on gender and in which women have full possibilities to make their own decisions and participate in the social, political, and economic life of the country with a feeling of equality is something that society has to take the initiative to do [2]. In light of this, the purpose of this research was to investigate the current state of women's empowerment in the rural parts of the Varanasi district.

**METHODOLOGY:**

A community-based cross-sectional research design is being used here, and it is based on primary data collected at the person level. In the rural parts of the Varanasi district in Uttar Pradesh, the research was carried out on women who were between the ages of 15 and 49 and were of reproductive age. It was decided not to include women who were suffering from mental illness and were unwilling to take part in the research. When a 10% non-response rate was taken into consideration, the total sample size was determined to be 523. This information was gathered between the 15th of March and the 30th of August in the year 2015. The interview schedule that was employed for data collection was

one that had been pre-designed and pre-tested. In order to determine the current state of women's empowerment, the Women Empowerment Scale (Nanda, Geeta. 2011. Compendium of Gender Scales, FHI 360/C-Change) became the instrument of choice. The following categories of things are covered in this scale: women's mobility, women's independence from family dominance, women's economic security, and women's contribution to the support of their families. For the purpose of conducting the analysis, the trial version 21.0 of the Statistical Package for Social Sciences (SPSS) was used. The methodology for the research was approved by the Institutional Review Board of the Institute of Medical Sciences at Banaras Hindu University in Varanasi. Prior to the collection of data, signed informed permission was obtained from the participants.

**DATA ANALYSIS:****A. Socio-Demographic Profile of the Respondents:**

The background characteristics of the respondents are shown in Table No. 1, which is organised according to the percentage distribution of respondents based on age, religion, caste, education, occupation, and wealth position. The lowest age of respondents is 17 years old, and the highest age of respondents is 42 years old. The mean age of respondents is 25.75 years plus

4.12 years. The age distributions of the respondents range from 6.3% in the age group of 15-20 years to 81.1% in the age group of 21-30 years, with the remaining respondents belonging to the age group of more than 30 years. Out of all the women who participated in the survey, 99% of them were married at the time, while 1% were either divorced or widowed. There was a minimum age of marriage of six years and a maximum age of marriage of twenty-five years among the respondents, with the mean age of marriage being 17.85 years plus 2.71 years. About ninety percent of the respondents are members of the Hindu faith, while the other respondents are members of other religions. According to the distribution of respondents according to caste, 46.3% of respondents come from other backward classes, 42.4% come from the SC and ST group, and the remaining 11.3% of respondents belong to the general caste category according to the distribution.

The distribution of the respondents according to the number of years of education they had finished showed that 22.8% of women had not completed any formal education or schooling, while 54% of women had completed formal education up to the level of high school or above. On the other hand, just 21% of women have completed their graduate or higher

education. There were only 20.8% of women who had jobs, while the remaining women were working as homemakers. A little less than forty-five percent of women were married before they became eighteen years old. On the basis of the family's per capita income (PCI), the socioeconomic class of the household was categorised in accordance with the BG Prasad socioeconomic classification (i.e. amended version May - 2014). An examination of the distribution of respondents according to the socioeconomic class of their families revealed that just 1.2 percent of respondents were members of families belonging to higher classes, while 8.6 percent of respondents were members of families belonging to upper middle class classifications. While 36.9 percent of respondents were members of the lower middle class, the remaining 42.8 percent of respondents were from families that were considered to be of the lower class. A mere 10.5% of the respondents were members of families belonging to the middle class. For the purpose of conducting further statistical analysis, some variable groupings, such as the level of education and employment of women and the socioeconomic status of the family, were combined.

Table No. 1 Distribution of Respondents on the basis of Socio-Demographic Profile

	Particulars	Frequency (N)	Proportion (%)
Age (years)	< 20	33	6.3
	21-30	424	81.1
	> 30	66	12.6
	<b>Total</b>	<b>523</b>	<b>100.0</b>
Religion	Hindu	482	92.2
	Others	41	7.8
	<b>Total</b>	<b>523</b>	<b>100.0</b>
Caste	SC/ST	222	42.4
	OBC	242	46.3
	Others	59	11.3
	<b>Total</b>	<b>523</b>	<b>100.0</b>
Education	Illiterate / Just Literate	119	22.8
	Primary / Middle	122	23.3
	Secondary / Senior Secondary	172	32.9
	Graduate / Above	110	21.0
	<b>Total</b>	<b>523</b>	<b>100.0</b>

**B. Women’s participation in decision making:**

One of the most important aspects of women's empowerment is the capacity to make choices that have an impact on the conditions of their own life. Information was gathered from married women regarding their participation in various types of decisions, including those pertaining to their own child, making household purchases for daily needs, making large household purchases, making decisions regarding their own health care, and

visiting their family or relatives. This was done in order to evaluate the extent to which women are involved in decision-making. When women were asked who typically makes each choice, they were given the following options: "primarily you, jointly with your husband, primarily your husband, or someone else, such as other members of the family?" There is a clear correlation between the capacity of women to make decisions and factors such as their age, level of education, job, number of children still alive, and so on.

Table No. 2 Women’s participation in decision making

Women’s participation in decision making- Percent distribution of married women who usually participate in decision making on various issues...(N=523)								
A person who decides...								
Women Participation in...	Husband		and Wife		Mainly		Other	
	Mainly	Wife	Jointly	Jointly	Mainly	Family	Members	Members
Decisions...	N	%	N	%	N	%	N	%

<b>Related To Child Birth</b>							
The number of children you will have	68	(13.0)	322	(61.6)	125 (23.9)	8	(1.5)
No. of Male & Female Child to have	68	(13.0)	319	(61.0)	128 (24.5)	8	(1.5)
Whether to use family planning	69	(13.2)	303	(57.9)	140 (26.8)	11	(2.1)
Spacing between the children	68	(13.0)	315	(60.2)	130 (24.9)	10	(1.9)
Unwanted pregnancy (whether to have or not)	70	(13.4)	304	(58.1)	140 (26.8)	9	(1.7)
<b>Related To Female Child</b>							
Daughter's ideal level of education	45	(8.6)	315	(60.2)	145 (27.7)	18	(3.4)
Daughter's going outside the home	45	(8.6)	311	(59.5)	148 (28.3)	19	(3.6)
Daughter's ideal age of marriage	44	(8.4)	311	(59.5)	145 (27.7)	23	(4.4)
<b>Related To Male Child</b>							
Son's ideal level of education	46	(8.8)	310	(59.3)	148 (28.3)	19	(3.6)

The percentage distribution of married women is shown in Table No. 2, which is organised according to the individual in the home who is typically responsible for making certain decisions. It is not possible to make a choice in which the majority of women are the only decision makers responsible for making it. There are only 33 percent of women who make choices regarding their own health care mostly on their own, and only 15 percent of women make decisions on trips to their own family or relatives on their own. Women are the least likely to make choices on big household expenditures mostly by themselves, with just 2% going in that direction. It is estimated that this percentage is as low as 9 percent for the whole country of India (NFHS-III, 2005-06). choices about trips to the respondent's family or relatives, followed by choices regarding the number of children to have, are the most prevalent types of decisions that are made via joint decision making. Decisions on day-to-day and big

purchases for the home are often made by other members of the family, such as grandparents or other members of the family who are considered to be part of the older generation.

**C. Status of Women Empowerment:**

It is not possible to visualise the state of women's empowerment using a single dimension; rather, a multidimensional evaluation that takes into account the many different aspects of women's lives and their position would bring about a clear idea. Therefore, the purpose of this study is to provide a fundamental understanding of the current state of women's empowerment in terms of mobility, independence from the dominance of the family, and economic stability. For the purpose of determining the current state of women's empowerment, the women empowerment scale was used. The mobility of women, independence from family dominance, economic security, and contribution to family support were the kind of items that were included in this measure.



In terms of mobility, the survey reveals that around seventy percent of women are empowered, as shown by the scale analysis. Nearly every lady has been to the market, as well as to the doctor, the clinic, or the hospital. In this group, 62 percent of women had gone to the market by themselves, and 55 percent of women had gone to the doctor, the clinic, or the hospital by themselves. The percentage of women who had ever been outside of their village or town was 99 percent, yet just 11 percent of women had ever gone to the movies or the theatre. Only twenty-five percent of women have travelled

outside of the community or village on their own as seen in Table 3. In terms of emancipation from the dominance of the family, more than seventy-five percent of women have achieved empowerment. The overall percentage of respondents who reported that their husbands took their money without their consent was 0.6 percent. Additionally, 0.8 percent of respondents reported that their jewellery was taken from them against their will. Furthermore, 19 percent of respondents reported that their husbands or other family members prevented them from visiting their parents' homes.

**Table 3. Women's Mobility (N=523)**

<b>Women Empowerment Scale - Women's Mobility (%)</b>		
<b>Women's Mobility subscale items</b>	<b>Frequency (F)</b>	<b>Proportion (%)</b>
1. Have you ever been to the bazaar?	520	99.4
2. Have you ever been there alone?	324	62.0
3. Have you ever been to the hospital/clinic/doctor?	518	99.0
4. Have you ever been there alone?	285	54.5
5. Have you ever gone to the cinema?	57	10.9
6. Have you ever been there alone?	1	0.2
7. Have you ever gone outside the village?	516	98.7
8. Have you ever been there alone?	131	25.0
<b>Status of Empowerment on the basis of Women's Mobility</b>		
Empowered Women*	364	69.6
Not Empowered Women	159	30.4

Scoring procedures- Each responder received one point for each location that she had visited, and an extra point was awarded to her if she had ever been to that location by herself. The continuous variable that was used was a scale that went from 0 to 8, and it ran from 0 to 8. When a

woman had a score of four or above, she was considered to be fully empowered.

**D. Results of Simple Binary Logistic Regression Analysis:**

According to the findings of binary logistics regression, there was a significant correlation between women's mobility and their age (odds

ratio = 35.65, 95% confidence interval = 10.1-124.97,  $p < 0.05$ ), employment status (odds ratio = 4.95, 95% confidence interval = 2.57-9.54,  $p < 0.05$ ), socio-economic class of the family (odds ratio = 3.70, 95% confidence interval = 1.35-5.00,  $p < 0.05$ ), type of family (odds ratio = 2.80, 95% confidence interval = 1.75-4.50,  $p < 0.05$ ), and the ability of the respondents to make decisions ( $p < 0.05$ ). Women who had a bank or other savings account (odds ratio = 2.02, 95% confidence interval = 1.38-2.94,  $p < 0.05$ ) and were linked with self-help groups or non-governmental organisations (odds ratio = 16.80, 95% confidence interval = 2.28-123.80,  $p < 0.05$ ) were also shown to have a significant association with women's mobility.

A substantial correlation was discovered between women's education, the socio-economic status of their families, and their capacity to make decisions, which was shown to be connected with women's emancipation from family dominance. Compared to women with lower levels of education, those with secondary and higher levels of education had a higher probability of experiencing independence from family dominance (odds ratio = 2.16, 95% confidence interval = 1.29-3.60,  $p < 0.05$ ). In a similar vein, it was observed that women who belonged to higher socio-economic classes had a greater likelihood of experiencing

independence from family dominance (odds ratio = 3.95, 95% confidence interval = 1.39-11.23,  $p$ -value  $< 0.05$ ) compared to women who belonged to lower socio-economic classes. Women who had the capacity to make decisions for their own health care (odds ratio = 7.75, 95% confidence interval = 4.31-13.95,  $p < 0.05$ ) and visits to individuals outside of their family or relatives (odds ratio = 4.79, 95% confidence interval = 2.27-10.10,  $p < 0.05$ ) were also more likely to be free from the influence of their family. By possessing a bank or other savings account (OR=1.71, 95%CI=1.13-2.60,  $p < 0.05$ ) and being involved with self-help groups or non-governmental organisations (OR=5.25, 95%CI=1.24-22.21,  $p < 0.05$ ), women were also more likely to experience independence from the dominance of their families.

There was a significant association between women's economic security and their age (odds ratio = 4.34, 95% confidence interval = 1.18-15.91,  $p < 0.05$ ), education (odds ratio = 2.08, 95% confidence interval = 1.15-3.77,  $p < 0.05$ ), and employment status (odds ratio = 5.86, 95% confidence interval = 3.65-9.40,  $p < 0.05$ ). The socio-economic status of the family was shown to have a significant impact on the economic security of women (odds ratio = 3.25, 95% confidence interval = 1.75-6.04,  $p < 0.05$ ). Women's decision-making ability in relation to their own health care (odds ratio = 9.53, 95% confidence



interval = 3.95-22.99,  $p < 0.05$ ) and visits outside the family or relatives (odds ratio = 3.06, 95% confidence interval = 1.58-5.95,  $p < 0.05$ ) was also significantly influenced by their association with self-help groups or

non-governmental organisations (OR = 5.21, 95% confidence interval = 2.60-10.43,  $p < 0.05$ ), as well as the presence of a bank or other savings account (odds ratio = 2.42, 95% confidence interval = 1.52-3.86,  $p < 0.05$ ).

**Table 4. Result of simple binary logistic regression analysis in relation status of women's empowerment**

Independent Variable	Women's Mobility		Freedom from Family Domination		Women's Economic Security	
	OR	95 % CI	OR	95 % CI	OR	95 % CI
<b>Age (in years)</b>						
≤ 20	-	-	-	-	-	-
21-30	5.08	2.35-10.99	0.98	0.38-2.155	2.39	0.71-8.04
> 30	35.65	10.1-124.97*	1.09	0.39-3.08	4.34	1.18-15.91*
<b>Education</b>						
Illiterate	-	-	-	-	-	-
Primary/Middle	0.89	0.52-1.52	0.85	0.49-1.47	1.26	0.61-2.57
Secondary/Above	1.29	0.81-2.06	2.16	1.29-3.60*	2.08	1.15-3.77*
<b>Employment Status</b>						
Not Employment	-	-	-	-	-	-
Employment	4.95	2.57-9.54*	1.46	0.85-2.53	5.86	3.65-9.40*
<b>Type of Family</b>						
Joint Family	-	-	-	-	-	-
Nuclear Family	2.80	1.75-4.50*	0.98	0.62-1.54	1.11	0.70-1.76
<b>Socio-Economic Class of the Family</b>						
I (Upper Class)	3.07	1.35-7.00*	3.95	1.39-11.23*	3.25	1.75-6.04*
II (Middle Class)	1.30	0.69-2.44	1.97	0.90-4.32	2.06	1.09-3.91*
III (Lower Class)	-	-	-	-	-	-

\* Significant at level 95%

\*\*Decision taken by husband alone were merged with decision taken by other family members

**RESULTS AND DISCUSSION:**

There is a favourable correlation between women's decision-making abilities and their age, level of education, work status, and the number of children that are still alive. There is a favourable correlation between women's rising levels of education and

their autonomy in making decisions about their own health care, family planning, and other related matters. There is a correlation between women's mobility and their ability to make decisions. Women are empowered in decision-making when they have the authority to make choices about

whether or not they should go outdoors by themselves or go to make purchases for the home. In the context of decision making, educational status has an impact on demographic factors such as the age at which a person gets married for the first time, the choice to have children, and the decision to take contraception.

It was said by Ullah et al. [3] that the significance of education for women has been acknowledged all over the globe. This is due to the fact that education enhances women's earning potential and gives them the opportunity to make choices about the number of their families and other family-related matters. The findings of the research indicate that educated women postpone marriage and make use of various techniques of family planning. According to Bbaale and Mpuga [4,] the favourable influence that women's education has on their autonomy, which results in later marriages, higher usage of contraception, and lower fertility rates. It has also been said that education for women may change the power dynamics within the home, therefore empowering women to take more control over many aspects of their life and turning them into more independent individuals.

Education for women is also said to change the power dynamics within the family, making women more independent and providing them with a

higher degree of influence over a variety of aspects of their life [5, 6]. According to Acharya [7], education is widely acknowledged as a significant element in the process of empowering women. According to Maitra [8], the influence of education on a woman's age at marriage is bigger when the woman has a higher degree of education from the beginning of her life.

According to Boonto [9], education is of utmost significance for women since it enables them to get access to decision-making power and enhances the quality of their existing lives. Employing women only enhances the chance of their participation in decision making if they are hired for monetary compensation; in fact, women who are employed but do not get monetary compensation are less likely to engage in decision making than women who are not employed. The likelihood of women participating in these home choices is higher for women who are working for monetary compensation and for women who live in nuclear families.

One of the most essential aspects of women's emancipation is the freedom to go about beyond the living room. When compared to other women, older women and women who live in families with just one parent have more freedom of mobility. Women who have completed the greatest level of education are more likely to access the market than women who have not completed any level of school. There is a

correlation between having a job that pays cash and having more freedom of movement, despite the fact that women have not been employed in the past (NFHS-III). Additionally, the job status of women and the socio-economic class of the family were shown to have a substantial relationship with the economic security of women.

**CONCLUSION:**

During the 21st century, the empowerment of women has emerged as one of the most significant concerns, not only on a national level but also on a worldwide one. The expansion of women's access to resources and their capacity to make strategic decisions in their lives is facilitated by this essential tool. Efforts are now being made by the government to establish gender equality; nevertheless, the actions taken by the government alone would not be adequate to accomplish this objective. A atmosphere in which there is no discrimination based on gender and in which women have full opportunity to make their own decisions and participate in the social, political, and economic life of the country with a feeling of equality is something that society has to take the initiative to establish.

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