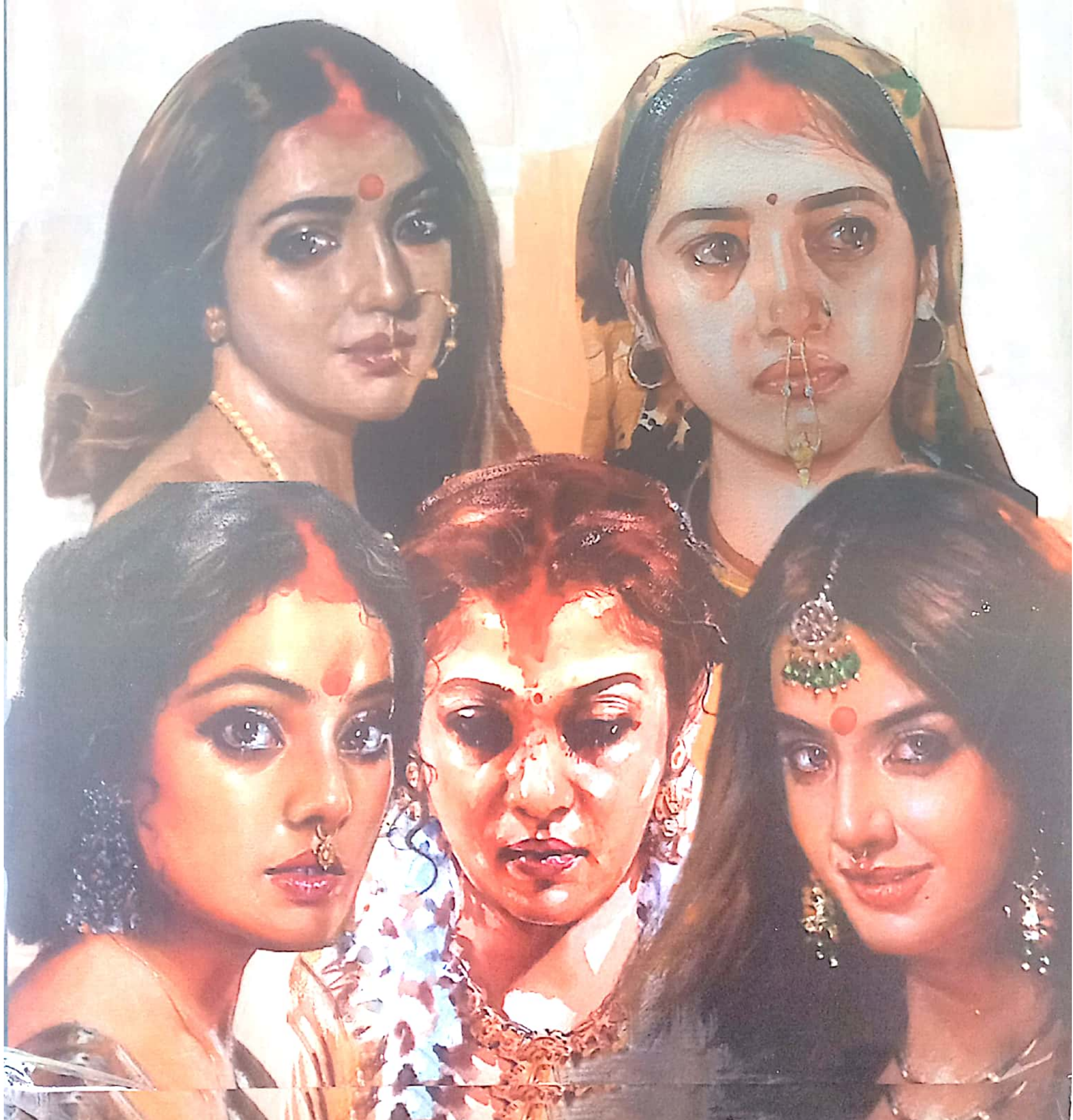


WOMEN IN INDIAN SOCIETY

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Women in Indian Society

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A Legal Approach to Women's Rights to Health and Welfare

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Introduction

India had uplifted itself from a traditional to modern society. There are numerous experiences where the revolutionary action were noted for major transformation in the nation, be it from the economical development to social, to political and to demographic development, gradually the progress of the nation is seen in most of the arenas. Empowerment is the new phenomena, which is leading the deprived communities towards a scope of development. Since ages together, women, children and lower caste communities faced several atrocities. They were refrained from seeking education as well as health benefits. However, gradually over the period, due to the efforts of great social leaders, the nation could pull itself out from few prejudices; those were pushing the deprived communities into the puddle of mud. While focusing on the women, the major change was seen only after independence when the attitude of the society has undergone a positive change. The girl child was allowed to take formal education, same as boys. Similarly, after education, she was also allowed to work for her financial stability. Several professional goals and carriers were kept open in front for her, so that her position in the society could uplift. Further, it was seen that, this phenomena was boosted, when the constitution had pass the law, where the minimum age for marriage for both boys and girls were defined appropriately. Child marriage was curbed down with the enactment of this law. Women started moving out of the house for formal education and pursuing careers in wide aspects, apart from teaching, nursing and other traditional occupations. The nature of occupation and its relationship to life outside work both are influenced by shifts in the social, political and economic element of societies.

Legal Aspects of Women's Right to Human Health

Many of the health problems faced by women can be categorized as injustices under contemporary human rights law, which ensures equality between the sexes. For instance, maternal death is merely the culmination of a string of injustices that many women experience. They are overworked, undereducated, and

the last to eat. Little attention is given to anything else they can perform because women are only valued for their ability to bear children.

The existing good examples of legislation that has improved the health of women should serve as inspiration for the worldwide community. Women are survivors despite the poor health that is frequently associated with socioeconomic conditions. They have ensured the survival of their offspring, families, and communities throughout history by surviving war, hunger, drought, and disease. They should be inspired and assisted to make use of the numerous fundamental freedoms and rights that enable them to achieve their own personal health objectives.

The ability to use the human rights framework pro-actively to promote a culture of equal worth and dignity for all people and the respect for the principle of non-discrimination, whether this relates to access to current goods and services or allowing for participation and freedom of choice, is a dynamic feature of the framework. More than treaties are required for the world's women. To make the conditions of these instruments a reality in their lives and in their access to healthcare, they urgently require action. This book serves as a manual for carrying out that action.

Women's Convention

The Women's Convention's widespread acceptance reveals both the advantages and disadvantages of international human rights law. The flaw is that treaties don't become legally enforceable unless States voluntarily join them, typically through ratification. The benefit of showing membership in human rights treaties is that States may feel morally obligated and gain political advantage from doing so. As a result, they accept the cost of membership, which is having to uphold the duties that give rights impact. In general, States Parties are required by the Women's Convention "to pursue by all appropriate means and without delay a policy of eliminating discrimination against women," and in particular, "to eliminate discrimination against women in the field of health care in order to ensure... access to health care services, , such as those pertaining to family planning. As a result, States Parties take on responsibilities to identify dangers to women's health. National issues, such as women's access to proper health care, patterns of health service delivery, and the epidemiology of women's illness and death, will dictate the tactics used by States Parties to combat health threats. The growing international imperative is that States' means of action should strengthen women's dignity and ability for self-determination, as well as promote and preserve the health of women.

Women's health is impacted by the right to the abolition of laws, practices, stereotypes, and prejudices that harm women's wellbeing. It is also essential to

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have the right to access healthcare services and education. Women are said to endure discrimination when they are treated less favorably than other members of their families, communities, or civilizations. Women experience compounding disadvantages due to characteristics like ethnicity, class, and, for example, geographic location when their families, communities, or societies are less advantaged than other families, communities, or societies.

Role of WHO in addressing Women Health and related issues

The WHO views health as including physical, mental, and social wellbeing in addition to the eradication of illness and disability. Therefore, it is important to pay attention to the whole range of human rights that extend beyond the provision of medical, nursing, and allied health services and that, in various ways and to varying degrees, contribute to the attainment and maintenance of health as defined by the WHO. As a result, the following rights are pertinent to the protection and promotion of women's health:

- the right of women to be free from all forms of discrimination;
- rights pertaining to individual freedom and autonomy, such as rights to life, liberty, and security;
- right to family and private life;
- right to information and education;
- right to healthcare and the advantages of scientific advancement;
- rights regarding women's empowerment, such as the right to freedom of thought and assembly; and
- rights to political participation.

Pervasive Neglect of Women's Health

Women are sometimes viewed as being somewhat insignificant in certain parts of the world. On a personal level, women are frequently socialized to experience poor self-esteem, to accept inferiority as a given, and to view the arrival of daughters as a sign of failure, regret, and pain. Families are known by their names, which are frequently descended from and carried on by the male line. Doctrines from the legal, theological, and cultural spheres may support the undervaluation of daughters. When daughters require dowry payments in order to marry into other families, the devaluation of women of all ages transcends status issues and spiritual considerations into the realm of practical interests. When women leave the family upon marriage, are unable to find employment when single, or become social outcasts through pregnancy before marriage, the family's investment in education yields no return. Since daughters-in-law run the risk of

dying during pregnancy, losing their fertility, contracting infections, or falling out of favor with their husbands, they are not worth investing in. Numerous women lack access to health as defined by WHO as a result of the combined effects of the multiple disadvantages that women experience and their devaluation within legal, religious, and cultural traditions and socioeconomic systems. Their disadvantages compound one another, as their vulnerability to miscarriage or infertility increases their devaluation, which in turn increases their vulnerability to sickness and early mortality.

Women's health is consistently neglected, regardless of their sex or gender. While gender can be viewed as a social construct that tackles "personality traits, attitudes, feelings, values, behaviors, and activities that society ascribes to the two sexes on a differential basis," gender is determined by genes and biology. Women are subjected to discrimination based on their sex in the health care system and other areas, such as when it comes to taboos and menstrual dysfunctions. However, because roles associated with the female gender are not valued in social and economic terms, women experience further prejudice. Many times, people who provide household services and child care in their own homes are considered to be "unemployed" and are not eligible for non-financial benefits connected to paid employment, such as occupational health benefits. Men typically have roles that are more prestigious than those of homemakers and give them primacy in their claim to the benefits of family labor, such as those of hunters, warriors, or breadwinners.

International Human Rights to Improve women's health

The right to be free from all forms of discrimination is the first right to be discussed in the analysis of international human rights to improve women's health, followed by the rights to life, liberty, and security of the person, the right to family and private life, the right to information and education, the right to health and health care, the right to the advantages of scientific progress, and the rights pertaining to women's empowerment. Examples of how each of these rights has been or might be used to address issues with women's health are provided. Depending on the pattern of health services, the growing understanding of health issues, and attitudes of how women's ill health might be prevented and managed in cost-effective ways, these rights may be handled differently in each country.

Through distinct and distinctly definable by law categories of rights, the application of international human rights is investigated. The concerns of women's health frequently straddle the lines that define one legally defined right from another. Advocates often claim that a number of rights have collectively been violated. They specify which individual convention articles contain which rights, and tribunals will make a distinction between each right in their rulings. However,

strategies for improving women's health must take into account all the various rights frequently at issue in a specific complaint.

Women should be protected from discrimination, thus laws affecting women's health should be carefully examined to make sure that they don't, for instance, reinforce harmful or trivialize sex-role assumptions that prohibit women from being treated fairly. The biological difference between men and women is their susceptibility to pregnancy. As a result, it may be demonstrated that pregnancy-related disadvantages, such as exclusion from education, public office, or employment (unless when non-pregnancy is a legitimate work-related necessity), are unlawfully discriminatory against women because they solely affect women. Women's rights are harmed by laws that forbid, limit, or need permission from another party in order to get health treatments. These regulations also limit women's ability to have families of the size and composition that best safeguards their and their families' health. Such restrictions on health services under the law may disadvantage women more than males and may therefore be considered discrimination against women.

Some nations that have ratified the Women's Convention have taken steps to implement it into national law. For instance, the Ministry of Public Health of Colombia recently interpreted the Women's Convention to include a gender perspective that recognizes "the social discrimination of women as an element which contributes to the ill-health of women" in national health policy. Article 12 on the provision of healthcare was added to Colombia's new Constitution in 1991 in order to incorporate the Women's Convention into national law.

Information for the exercise of choice typically consists of a fair description of the form of management suggested, as well as fair descriptions of alternatives to what is suggested (including delaying and not receiving any treatment), the known outcomes of each management option (i.e., their rates of successful outcome), the risks associated with each option (whether successful or not), and the likely impact of each form of management on the individual's lifestyle. The knowledge base on which health professionals base the advice they give is not always sensitive to women's health circumstances and requirements, and proposed action may actually worsen women's health impairments. This is due to inadequate research into and understanding of the distinctive features of women's health and illness.

Conclusion

When a patient has not received appropriate information about the failure rate of a technique of family planning she is considering embracing and when usage of the method results in an unwanted pregnancy or unintended infertility, there has been a significant violation of personal liberty and autonomy that is

special to women. In order for patients to make properly informed decisions about contraceptive techniques, health providers have an ethical and legal need to provide accurate information on the rates of contraceptive failure. It is not a medical decision in and of itself to accept or refuse medical care. Each person must make their own particular choice. According to her personality, likes and dislikes, comforts and discomforts, and life goals as impacted by personal, family, social, philosophical, and associated perspectives, the person must make the choice. The responsibility of health professionals is to provide the individual decision-maker with medical and other health-related knowledge that enhances that power without distorting or unbalancing it.

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