



*Dr. Renu Goel Dr. Garima Sinha*

# RESEARCH HANDBOOK ON GENDER AND SEXUALITY



ALEXIS PRESS  
JERSEY CITY, USA



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AND SEXUALITY**



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*Published by:* Alexis Press, LLC, Jersey City, USA  
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First Published 2022

*A catalogue record for this publication is available from the British Library*

*Library of Congress Cataloguing in Publication Data*

Includes bibliographical references and index.

Research Handbook on Gender and Sexuality by *Dr. Renu Goel, Dr. Garima Sinha*

ISBN 978-1-64532-689-2

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## CHAPTER 1

### Embracing Diversity: Unraveling the Spectrum of Gender Identities

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#### ABSTRACT:

Gender is a basic part of human identity that shapes how people see themselves and how society sees them. This chapter offers a basic review of gender, evaluating its complexity from the cultural, societal, and individual perspectives. Gender is a multifaceted and flexible concept that goes beyond the conventional binary distinctions between male and female. The contrast between sex, which is based on biological traits, and gender, which includes the psychological, social, and cultural qualities that people connect with their identity, is examined in this chapter. An important topic in this debate is how society shapes and reinforces gender norms and expectations. People are socialized into certain gender roles starting in early infancy, which affects their behaviour, goals, and opportunities throughout their lives. The negative impacts of inflexible gender stereotypes and the need of developing a more tolerant and inclusive society are also discussed in the chapter. In addition, this chapter explores the range of gender identities, such as transgender, non-binary, genderqueer, and genderfluid. Promoting inclusion and recognising the range of human experiences requires an understanding of and respect for these varied identities. The chapter also discusses how gender intersects with other social categories including race, ethnicity, sexual orientation, and disability. Intersectionality highlights the significance of taking into account various dimensions while researching gender-related problems by shedding light on how people may perceive advantage or discrimination depending on the mix of their identities.

#### KEYWORDS:

Cultural, Gender, Identity, Society, World.

#### INTRODUCTION

From the time we are very young, gender legend permeates our environment. It is often used in discussion, humour, and conflict to explain anything from eating habits to driving habits. We see gender as entirely natural because it is ingrained so deeply in our institutions, behaviours, convictions, and wants. The world is teeming with gender-related theories, and since these theories are so prevalent, we embrace them as scientific fact and assume that they are real. However, it is our responsibility as academics and researchers to examine behind what could seem to be common sense in order to discover not only what truths might be concealed within but also how it came to be common sense. We need to take a step back and look at gender from a different viewpoint since gender appears natural and gender-related ideas seem to be self-evident realities. To do this, we must set aside our habits and comfort zones and reconsider some of our core convictions. This is challenging because gender is so intertwined with how we see ourselves and the world that it is difficult to step back and consider it from fresh angles. But what makes the study of gender intriguing is exactly the way in which gender seems to be self-evident. It presents the task of figuring out the building process that gives rise to what we have long



believed to be natural and inevitable - to examine gender not as a given but as an achievement; not just as cause but as consequence; and not just as individual but as societal. Failure to recognise this difficulty has consequences that may be seen in both academic work on language and gender as well as in the popular media. As a consequence, some gender studies serves not so much to encourage more thoughtful and educated thinking about gender as to reify and sustain preexisting attitudes[1], [2].

### **Male and female**

Gender is not something we have or are born with; rather, it is something we do and perform. Imagine a little child following his father with pride. He is trying his hardest to be like his father, to be a man, as he struts about and puts out his chest. Although it's likely that his father doesn't exude swagger, the young youngster is developing a character that reflects his admiration for his adult male role model. The same may be said about a little child who is donning her mother's high-heeled shoes, doing cosmetics, and running around the room. Although it's unlikely that these kids would swagger and mince when they're older, the behaviours they displayed as youngsters might still be present in their adult male and female behaviours. The girl may sometimes acquire that swagger as well, but adults are unlikely to find it as endearing as her mincing performance. And it's likely that the boy won't be thought of as attractive at all if he chooses to attempt a little mincing. In other words, gendered performances are accessible to everyone, but they also impose restrictions on who may freely assume certain personae. And here is where gender and sex intersect, as society works to align social norms with sex roles determined by biology.

Gender is the social elaboration of biological sex, while sex is a biological classification that is based largely on reproductive capacity. It is hardly unexpected that gender is strongly entwined with societal standards for heterosexual marriage and the upbringing of any offspring. But the narrative doesn't end there. Gender draws on biological sex, but it magnifies biological differences and extends them into contexts where they have no business being there. It is not biologically necessary for males to swagger and women to mince, or for women to have red toenails while men do not. Although we often conceive of sex as biological and gender as social, these concepts are not always clearly separated. People often believe that sex is the consequence of nature, determined only by biology, whereas gender is the product of upbringing, social and hence changeable. But there is no clear boundary between sex and gender since nature and upbringing interact.

However, the clear distinction between male and female sex is ineffective since there is no one objective biological standard. The selection of these factors for sex assignment, which include morphological, endocrinal, and chromosomal characteristics, is heavily influenced by societal expectations of what truly distinguishes a person as male or female. As a result, the basic definition of the biological categories of male and female, as well as how individuals see themselves and others, are ultimately social constructs. Labelling someone as a man or a woman is a societal choice, according to Anne Fausto-Sterling. We may utilise scientific facts to aid in our decision-making, but only our gender ideas, not science, can determine what sex we are. Furthermore, the kind of information that scientists first develop regarding sex are influenced by our gender preconceptions. Although biology provides us with binary male and female prototypes, it also provides us with a large number of people who do not fit those prototypes in any particular manner. One in every 100 kids is born with a body that isn't quite like a typical

male or female. These bodies might have a variety of genital and reproductive organ arrangements, unique chromosomal composition, or other characteristics. Intersex may be attributed to a person before they are even born; for instance, 1 in 66 females will develop their clitoris throughout their youth or adolescence. When anomalous newborns are born, medical and/or endocrine interventions may be utilised to force their stubborn bodies closer to the male or female categories. Medical convention places strict restrictions on both the male and female genitalia. A clitoris that is longer than one centimeter or a penis that is shorter than 2.5 centimeters when stretched at birth are sometimes subject to surgery to be made shorter to an acceptable clitoris size. The most common surgery converts unacceptable penises into clitorises, regardless of the child's other sexual characteristics, even if this necessitates creating a nonfunctional vagina out of colon tissue, as many critics have noted. This is because male genital standards are much stricter than female ones. Since the Intersex Society of North America<sup>3</sup> began advocating for the medical rights of intersex people in recent years, the medical community has become more aware of the physical and psychological problems brought on by gender surgery and gender assignment<sup>[3], [4]</sup>.

There may be social categories other than the conventional two into which such newborns may be classified in communities where specific types of hermaphrodite or intersex infants are more common than elsewhere<sup>4</sup>. However, even in these civilizations, categories beyond the basic two are often seen as anomalous.<sup>5</sup> Furthermore, even in countries where sex assignment was simple at birth, a person may later acquire a gender identity that differs from the one that was originally given based on physical grounds. Transgender persons may choose to accept the alternative of the two possibilities that are often offered or they might reject gender binary thinking completely.

## DISCUSSION

It is sometimes believed that permanent disparities in aptitudes and tendencies between men and females result from biological differences between the sexes. For instance, higher testosterone levels are thought to make males more aggressive than women, and left-brain dominance is thought to make men more logical while relatively less brain lateralization makes women more emotional. However, the link between physiology and behaviour is not straightforward, and it is all too tempting to draw distinctions between the sexes. Additionally, physiology itself is more complicated than is often recognised. It has been shown that certain activities may have an impact on hormone levels, brain activity patterns, and even brain structure. For instance, studies with animals as diverse as fish and rhesus monkeys have shown that changes in social standing may affect hormone levels. The research on sex differences in the brain is still extremely early and far from being settled.

Men's allegedly smaller corpus callosum, larger amygdala, and bigger mammillary nucleus are just a few of the dubious anatomical distinctions that are purported to account for gender differences in everything from men's stronger visual-spatial abilities to their propensity to look at breasts. The scientific literature often exaggerates and even distorts what is written there, and much of the popular work on gender differences in the brain is based on dubious data. And the scientific literature itself is based on really tiny samples, sometimes from people who are ill or damaged. Additionally, little is understood about the relationships between brain physiology and behaviour or cognition, and as a result, less is known about the effects of any physiological abnormalities that researchers may discover. The brain is very malleable and changes as a result

of experience. Thus, it is impossible to determine what causes changes in brain activity and physiology. However, any findings that could suggest physiological distinctions are quickly seized upon and paired with a wide range of gender preconceptions in some sometimes-ludicrous leaps of reasoning. The results of these jumps may then be used to directly influence social policy, and in particular educational policy, by arguing that gender parity in left-brain areas like engineering and mathematics is not conceivable.

Deborah Cameron calls the pursuit of biological gender distinctions the new biologism and notes that the language characteristics that scientists are attempting to explain physiologically are not even actually supported by serious linguistic research. Those who advocate for biologically based explanations of sex differences also tend to ignore the correlations between linguistic differences between genders and racial and social class, as well as the historical and cultural variations in many of the sex differences they cite as biologically based. We invest a lot of effort on emphasising, generating, and enforcing the binary categories of male and female, as shown by certain scientists' haste to prove a biological basis for all gender differences and the public's readiness to adopt these discoveries. In the process, differences or similarities that obscure the boundaries of these categories or that may possibly represent additional possible categories, such as the vast array of distinctions between females and men, are backgrounded or eliminated [5], [6].

The question at hand is not whether there are biological variations between sexes that could impact aspects like dominant cognitive styles. The position of such research in social and scientific practice is under question. Sex inequality is being positioned at the center of action, serving as both a question and an answer, since often scant biological data is combined with unresearched behavioural assumptions. And the findings are reported in the most prestigious media outlets as if they had the same scientific standing as the mapping of the human genome. To make matters worse, generalisations based on irrationally tiny and uncontrolled samples sometimes assume a veneer of scientific rigour when expensive scientific equipment, like fMRI, is used. And speaking of the genome, many of these studies were unreliable after reviewing the considerable research on sex-related variations in genetic effects for characteristics and prevalent disorders. More than half of the reported gene-sex interactions had not reached statistical significance, and even the best research had seldom been confirmed. When significance was identified, it was often of a very low level. According to Sarah Richardson, because sex is one category that is identified in all genomic databases, statistical analysis of gender differences is simple and straightforward.

This alone demonstrates that there is an unquenchable thirst for dramatic gender news among everyone, including scientists, journalists, and readers. In fact, the central issue in our modern reality is gender. And for those seeking an explanation and justification for the present gender roles or even those from the past any proof that our social world corresponds to the biological world is acceptable. No matter how much biology may have a role in gender, it does not come spontaneously and immediately from our bodies. The profession, gait, or vocabulary used to describe colors are not influenced by a person's chromosomes, hormones, genitalia, or secondary sex traits. There are many adult males who could wear a pageboy or a beehive just as readily as many women, and nothing biological prevents women from shaving their heads, even if male pattern baldness may limit some of them in terms of hairstyle. In order to establish gender, biological distinctions are emphasised and expanded where they exist.

Gender is the very act of generating a split by eschewing similarity and expanding on difference. A particularly noticeable illustration of society's obsession with women's breast size is that breast augmentation surgery is now widely accessible. More than any other cosmetic surgery, 346,524 breast augmentation operations were carried out in the US in 2007. Since many women and men hold the same points on the scale, actual distinctions between men and women often take the form of scales rather than dichotomies. Think about our voices. Men often have lower voice pitches than women because their vocal tracts are longer on average. However, the real conversational voice pitch of people does not simply follow the vocal tract's dimensions throughout society. Males and girls begin to distinguish their voices from the age of four to five, long before puberty distinguishes between male and female vocal tracts, as males consciously and instinctively drop their voice pitch while girls increase theirs. Ultimately, regardless of the length of the vocal tract, one can typically discern whether even a very young infant is male or female based only on the pitch and sound of their voice. According to Philip Lieberman's research, the social influence on voice pitch seems to start as early as infancy.

For example, a 10-month-old kid babbled to himself at 430 Hz while alone, but dropped to 390 Hz when with his mother and to 390 Hz when among other people. With his father, 340 Hz. Despite the fact that this is more about how people try to mimic their interlocutors than it is about gender, it is nevertheless evident that pitch disparities become noticeable at a very young age. Another biological difference that is emphasised and exaggerated in the construction of gender is relative physical size. In the USA, over half of both men and women are between 64 and 70 inches tall. With such a large overlap, it stands to reason that the lady would likely be taller than the guy in any given male and female couple. Since height plays a big role in people's decision to date a straight partner, one really very infrequently finds such a combination among heterosexual couples. Although there is no biological reason why women should be shorter than their male partners, a huge majority of couples do have this height connection, which is far more common than what would happen in a selection process when height was chosen at random. Not only do individuals choose their partners to be shorter than them, but they also perceive him to be shorter than her even when it is not the fact.

College students were asked to estimate the height of persons in images. It was feasible to compare the heights of persons in different images since each one contained a reference object, such as a doorway or a desk. The judges saw the guys as taller than they really were and the girls as shorter than they actually were despite the fact that images of a male and a female of the same height were matched. This book will concentrate on gender as a social construction, or as a way for society to differentiate people into the many genders that make up the gender order. While we acknowledge that ordinary males and girls are subject to certain physiological limitations due to biology, we regard the elaboration and amplification of these disparities as well as the erasing of differences between males and females as wholly social phenomena. This does not imply that people are powerless tools moulded by uncontrollable social forces; rather, the social develops when people form their own opinions, interact with others, and understand how others interact with them. Furthermore, it does not imply that a person may simply choose their gender identification. Nobody is truly born this way as an adult, but everyone has limitations due to both their original biological make-up and the social milieu in which they develop.

The origins and importance of gender will be subject to the reader's own set of views, which they will bring to this book. They could have specific perceptions on how biological and medical research affects gender. They could have certain gender-related religious convictions. The

distinction will be in where one ends off and the other starts. The idea of the social elaboration of sex is not incompatible with believing in a biological or supernatural necessity. We only ask that our readers approach the information and ideas we provide with an open mind. We have been thinking about these topics for a long time, and we have formed and modified our own views on gender. We will definitely continue to develop these views as we continue to examine gender issues in our work and personal lives. This article about gender was written from a mostly feminist standpoint. As we comprehend that viewpoint, there are significantly less differences between men and women's fundamental capabilities<sup>4</sup>, rights, and obligations than is often believed. The societal treatment of men and women, and therefore their experiences and expectations of themselves and others, is significantly more diverse than is often believed, according to that viewpoint. In this book, we present evidence that the disparities between the treatment of men and women result in large part from people's mutually developed sexual difference-related beliefs and interpretations, as well as from their reliance on these beliefs and interpretations to support the unequal treatment of men and women[7], [8].

### **Acquiring gender knowledge**

Men are created, just as women are, to use Simone de Beauvoir's famous phrase, Women are not born, they are made. A man or woman is made in an unending process that starts before birth. Starting when a person starts to speculate whether the next kid will be a boy or a girl. This attribution is further made public and enduring by the linguistic process of name. And the ceremonial pronouncement at birth that it is, in fact, one or the other quickly changes a it into a he or a she, standardly allocating it to a lifetime as a male or as a female. Sex-ambiguous given names are sometimes prohibited by the government or by religious organizations. In Finland, for instance, the official baby's name must be chosen after consulting lists of acceptable female and acceptable male names. Not all names in English-speaking cultures are sex-exclusive, and names may shift how they are classified as male or female. For instance, Whitney, which was originally only used as a surname or a male first name in America, is now given to infant girls. Evelyn, on the other hand, was once accessible as a male name in Britain long after it had become an exclusively female name in America. However, these modifications have little effect on the gender bias in English names.

As a result, from the time of our birth, the contrast between male and female serves as the foundation for who we are. These early language activities prepare a newborn for life by starting a gradual process of learning to identify as a boy or girl, a man or woman, and to view everyone else in the same way. We will be required to model other aspects of ourselves as a function of that fundamental dichotomy as there are presently no other simple methods to think about ourselves and others. Adults will first assign the kid a gender by treating it as either a boy or a girl and reading its every action as belonging to either gender. The kid will then gradually learn to take control of its portion of the process, carrying out its own gender work and developing the ability to assist others' gender work. People usually want to know a baby's sex right away, but social convention offers a variety of excuses to avoid having to ask. As a kid grows, it becomes more crucial to avoid having to inquire. Many hospital nurseries provide pink hats for girls and blue caps for boys as well as other visual cues to the baby's given sex at the time of birth.

While this may seem relatively normal to members of the community, in reality, the colour coding does not highlight any differences that would affect how newborns would be treated medically. When purchasing a gift for a newborn infant in the US, you will be asked boy or



girl!?' right away. Gender liberalism may allow for the wearing of dungarees by girls, but that's about it. The likelihood of purchasing dungarees with a vehicle print for a girl is low, and the likelihood of purchasing a frilly dress with puffy sleeves or dungarees with pink flowers for a guy is even lower. Additionally, salespeople will probably advise you to stay with basic yellow, green, or white items if you are purchasing clothes for a baby whose sex you are unsure about. Because gender attributions have permeated into our perception of the colors, people tend to assume that pink is a more delicate color than blue. This is because colors are so fundamental to how we think about gender. This is a perfect illustration of the naturalization of an arbitrary symbol. According to Anne Fausto-Sterling, in the late nineteenth and early twentieth centuries, males were more likely to wear vivid pink than girls were to wear blue.

If sex naturally determined gender, one could anticipate that everyone would just accept the baby's gender as it developed. However, as the infant develops into, and learns how to be, male or female, the sex determination process actually prepares the youngster for a lifetime process of gendering. Even when children are dressed, names and clothes are just a tiny portion of the symbolic resources utilised to establish a constant continuing gender attribution. It shows that first sex assignment involves much more than just a simple observation of a physical attribute that we may talk about a kid growing up as a boy or a girl. Being a girl or a boy is not a set condition; rather, it is a continuing achievement that is actively pursued by both the person who falls into that category and others who interact with them in the many groups to which they belong. The infant first relies on other people to determine its gender, and these other people manifest themselves in a variety of ways, not only as individuals but also as members of socially organized groups that connect people to social institutions and cultural beliefs.

The idea that gender is a joint endeavour and that one must learn to function as either a man or a woman while still needing help from their environment is arguably most apparent at this formative era of life. In fact, unless we can assign a gender to a person, we have no idea how to connect with them, criticise them, or even communicate about them. We almost cannot go forward without taking gender into account since gender is so profoundly ingrained in our social practices, in how we see ourselves and others. Depending on whether they think the computer voice is male or female, people even appear to apply gender preconceptions to computer-generated speech. Most of our interactions are influenced by how we present our own gender and how we attribute gender to others, even though most of us seldom ever realise this in regular life.

Male and female children are treated and perceived differently starting in infancy. According to experimental data, adults' opinions regarding the sex of newborns have an impact on how they see babies. Adults who saw a screaming baby on tape were more likely to interpret the cry as furious if they thought the baby was a male than as plaintive or afraid if they thought the baby was a girl, according to Condry and Condry's research. In a related study, participants saw a 24-hour-old newborn as larger if they thought it was a male and as having finer features if they thought it was a girl. The manner that individuals interact with newborns and young children is then influenced by these judgements. Infants are handled more tenderly when people think they are male and more playfully when they think they are female. They also communicate with them differently. Parents employ more diminutives, inner state terms, direct prohibitives, and emphatic prohibitives to males than to girls. They also use more direct prohibitives to boys than to girls. One may argue that because guys tend to transgress more than girls, they might require greater restrictions. The fact that Bellinger and Gleason discovered that this trend was unrelated to the

actual nature of the children's activities suggests that the adults' attitudes about sex differences are far more significant in this situation than the children's behaviour.

Boys and girls do learn to behave differently when they get different treatment. According to research, male and female newborns scream about equally, but as males become older, they cry less and less. Some data suggests that this variation results mostly from the differing adult reactions to the sobbing. Similar processes also give rise to behavioural disparities in quality. In a study of 13-month-old creche toddlers, instructors reacted to females when they chatted, babbled or made gestures, but only to boys when they cried out, shouted or wanted physical contact. Nine to eleven months later, the same boys moaned, shouted, and sought attention more than the females, while the same girls spoke more than the boys. Children's future behaviour, which at the very least statistically seems to vary between the sexes, is a result of adults' varied reactions to behaviours that are often quite identical indeed. Even with significant differential treatment, the children do not develop dichotomizing behavioural patterns; rather, they learn to do gender for themselves and create sex-differentiated behaviour[9], [10].

Voice, which we've previously noted, offers a striking illustration of how young toddlers are beginning to act gender. Despite having the same vocal equipment, girls and boys start to distinguish the fundamental frequency of their speaking voice at the age of four to five. Girls are more likely to spread their lips, which shortens the vocal tract, while boys prefer to round and extend their lips. Boys' pitches are falling, while girls' pitches are rising. It's possible that grownups are more inclined to talk in a high-pitched voice to females.

It's possible that they give distinct voice production awards to males and girls. Children may potentially be only seeing this difference in older adults, or their varied engagement in games may need distinct vocalisations. For instance, Elaine Andersen demonstrates that youngsters utilise high pitch while speaking in teacher register or baby language during pretend play. Some kids have the vocal pitch of the opposite sex when they talk. However, while using comparable vocal apparatus, there is a noticeable creation of voices with primarily diverse pitches.

The degree to which people really treat boys and girls differently is a topic of intense disagreement among experts, and many point out that the similarities much outweigh the differences. Psychologists nearly exclusively do research on early gender development and gender differences in general.

As a consequence, the research it discusses is generally based on behavioural observations in constrained environments, such as a laboratory, a household, or a preschool. These studies may overlook the cumulative impact of subtle variations across a wide range of contexts because they concentrate on a small number of locations and interaction types and do not follow children throughout a typical day. Children may undoubtedly understand what it means to be male or female in their culture by seeing little variances here and there.

You may see the minor difference's importance from a different angle. The key socializing agents are often treated in the psychological literature as parents, other adults, and peers. Researchers have just lately started to look into how children actively navigate the social environment on their own. Children are quite aware of their gender by the time they are three years old, according to Eleanor Maccoby. Given this information, it is not quite obvious how much discriminatory treatment children need in order to acquire the skills associated with their assigned gender. They mostly need to hear the message which is all around them that men and

women are intended to be different. It is becoming more and more obvious that kids are actively involved in their own growth. They start concentrating on the task of growing up as soon as they recognised themselves as social creatures.

Additionally, many of the gendered developmental patterns we examine here are likely experienced by them in a way that is more adult than gender-appropriate. The biggest taboo is being a baby, although gendered development is necessary. For males and girls, leaving childhood behind and becoming an adult entail quite different things. Children do not behave as good or bad people, but rather as good boys or good girls, and they develop into big boys and big girls.<sup>7</sup> In other words, they do not have the option of growing into just people, but rather into boys or girls. And the fact that growing up involves gender differentiation is encoded in the words of assessment with which progress is monitored. This does not imply that they see their actions only in terms of gender. When boys and girls change the underlying frequency of their voices, it's likely that they're not aiming to sound like girls or boys but rather aspire to a trait that is inherently gendered, such as sweetness or authority. The child's ambition is also motivated by want, not only logic. It is a projection of the self into desirable modes of social interaction. Desire is a powerful tool for looking forward and for the ongoing self-transformation that characterizes growing up.

Boys and girls play similarly up until about the age of two. After then, boys and girls start choosing various toys and engaging in different activities, and kids start watching each other's play and enforcing rules against gender-inappropriate behaviour. Boys tend to develop more aggressive than females, which is sometimes attributed to hormonal and perhaps evolutionary differences. However, it is evident that this disparity is encouraged and accentuated by the social structure, regardless of how biology functions. As kids become older, parents and then peers start keeping an eye on and differentiating their play styles. It has been shown that parents of young children encourage their kids to choose toys that are suitable for their gender. And while if parents' encouragement of their kids' gendered behaviour isn't always and most definitely not always a deliberate attempt at gender socialization, their actions are probably more influential than they realize. Even parents who feel they do not limit their children's behaviour along gender lines and who strive for gender equality have been found to do so in experimental settings.

### **Acquiring Asymmetries**

Although gender is developed by a community, not all members of the group are equally active in imposing difference. Males - both children and adults have shown to be more involved than females in imposing gender difference, according to study on early gender socialization. For instance, dads misjudged the size and texture of children more severely than moms in the study by Rubin et al. previously mentioned. Fathers speak to boys and girls differently than mothers do, and men are more likely than women to praise kids for picking toys that are suitable for their gender. Men are also more likely than women to play physically with boys and softly with girls. Men who desire to be more active parents than their own dads were now have publications available to them. The message, however, persists that raising a girl is quite different from raising a male. Not only that male adults seem to impose gender more strongly than female ones. Boys are the target of this enforcement more so than females. Boys are more likely than girls to get rewards from adults for choosing toys that are gender-appropriate, and dads are more likely to do this for their own kids than for other boys.



In contrast to females, guys are more set in their toy selections and are more critical of other boys for playing in an unsuitable way than they are of girls. According to research of children aged three to five, boys were more prone to reprimand their male peers for making feminine decisions than girls did. Boys only reacted favorably to boys who played in masculine-oriented ways. The result is that whereas male activities and behaviours are viewed as suitable for both men and women, feminine activities and behaviours are solely treated as appropriate for females. One way to look at this is that whereas male activities and behaviours develop as unmarked or typical, female activities and behaviours emerge as marked, as being reserved for a certain fraction of the population. The androcentric perspective of gender, which we shall address in the chapter's next part, is a result of this. This imbalance is caused in part by the societal undervaluation of women and the feminine. In one way or another, most boys and girls learn that males' hobbies and activities are severely discouraged and that boys' interests and activities are regarded more highly than girls' interests and activities. Most boys and girls learn to count and control the flow of events in the public realm, even when they do not directly meet these notions or even find them rejected. Therefore, it should come as no surprise that there are asymmetrical gender conformity demands [11], [12].

This imbalance covers a wide range of topics. Male attire may be worn by females, but the converse is strongly stigmatized. Western ladies and girls are increasingly wearing jeans, while their male counterparts are not showing up in skirts. Even names seem to shift from masculine to female but not the other way around. Christopher is a girl's name, whereas Christine is a boy's name. But there is a tomboy category reserved for girls who adopt a male rough and tumble style of play, who demonstrate fearlessness, and refuse to play with dolls. A girl may be sanctioned for behaving like a boy on the grounds that she is being unladylike or not nice but particularly if she behaves aggressively, and gets into fights. While this classification may be seen negatively in certain groups, it generally garners respect and appreciation in western culture. On the other hand, boys who mimic females' behaviours face harsh penalties. Boys who don't properly follow the rules of masculinity are referred to be sissy; the adjective is never used as a praise. A young kid who is informed that because she is a female, she must do more housework than her brother or that she cannot become an astronaut when she grows up is likely to object and remark, That's not fair. A boy may also think it unfair if he is told he cannot play with dolls or become a secretary when he grows up because he is a male. However, the young man who is told he cannot become a nurse is also informed that he is too intelligent to become one. On the other side, the girl is effectively informed that she is not qualified to be a doctor.

For the youngster who really wants to play with dolls or become a nurse, the implications might still be devastating. He will be left without a justifiable feeling of injustice within society's larger discourses on justice, which would isolate him and his experience of injustice. Children learn this quite early on, although gender specialization does convey the implication that men's businesses are often superior than women's. There are now several exceptions to these broad patterns, many of which were brought about by the feminist and LGBT rights movements. Men are increasingly taking women's occupations, while women are increasingly taking men's ones. Additionally, more and more males are doing formerly reserved for women chores like regular cooking and changing diapers. In nations like those in Scandinavia that provide significant parental leave to males, this is undoubtedly progressing quickly. However, the prevalent trend that prevents males from entering what are considered to be women's domains and thus devalues them is by no means obsolete.

## Separation

Different cultures and communities encourage difference to varying degrees via isolation. Guys play more with other guys than girls do. Additionally, both industrial and nonindustrial civilizations exhibit the same tendency across cultures. With respect to factors like the genders and ages of their siblings and neighbors, participation in same-sex playgroups among children in western industrialized nations varies greatly. At certain points in their lives, some children spend more time with their peers of the same sex than others. Despite the fact that children may play in mixed-sex groups, there is a propensity for them to seek out - and to be forced to seek out - same-sex groups. Girls who prefer playing with guys are tolerated, and maybe appreciated, but boys who prefer playing with girls are not. This restraint is harsher for boys.

According to psychological studies, many American children start to like same-sex playmates as they get closer to the age of three, which is about the time they start to clearly define their own gender. As they get older, this preference becomes more and more pronounced. According to Eleanor Maccoby, this inclination manifests itself in institutional settings where kids are exposed to plenty of their own age peers, such as nursery, preschool, and elementary school. In keeping with this trend, Barrie Thorne notes that although there may not be as many options in neighborhoods, schools provide a population big enough for boys and girls to be able to segregate.

## CONCLUSION

Different civilizations have approached the idea and definition of gender in different ways throughout history. Some of these cultural viewpoints are highlighted in the chapter, highlighting how important it is to recognize and respect the many cultural practices and ideas around gender. The summary concludes by discussing the changing environment for gender rights and activism, concentrating on the advancements achieved in advancing gender equality and addressing discriminatory practices. However, it also recognizes the persisting challenges and discrimination experienced by gender minorities across the globe. This explores gender in an introductory way, emphasizing its complexity and the impact it has on both personal relationships and social institutions. We can build a more accepting and understanding society that celebrates the diversity of human expression by recognizing the variety of gender identities, dispelling harmful stereotypes, and promoting equality.

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## CHAPTER 2

### **Heterosexual Market: Understanding Preferences and Consumer Behavior**

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#### **ABSTRACT:**

The heterosexual market is a complicated social phenomenon with many facets that reflects societal norms, attitudes, and preferences. The heterosexual market is now in a state of flux, and this chapter explores its trends, dynamics, and sociological ramifications. The heterosexual market encompasses a huge range of businesses and consumer habits rather than just conventional dating and marriage. It is critical for companies and legislators to comprehend the preferences, requirements, and expectations of heterosexual people if they want to cater their goods and services to this dominating group. The market has seen changes in attitudes around gender roles in recent years, which has raised demand for goods and experiences that defy conventional stereotypes and support more liberal and inclusive viewpoints. The rise of technology-driven platforms has also changed the way people engage, communicate, and look for romantic and platonic relationships. This chapter explores the heterosexual market's economic ramifications and highlights its expansion and profitability possibilities. A few industries that depend on serving heterosexual customers are the wedding business, dating applications, and relationship counselling services.

#### **KEYWORDS:**

Gender, Heterosexual, Identity, Market, Society.

#### **INTRODUCTION**

Children tend to gravitate towards same-sex groups in these situations, although they often keep cross-sex connections they had before the institution. It is important to remember that children often play in mixed-sex groups and that the preference for same-sex play groups is not absolute. According to research by Maccoby and Jacklin on preschool-aged children's choice of playmates, four and a half-year-olds play in same-sex groups 47% of the time, mixed groups 35% of the time, and other-sex groups 18% of the time. Even though there is some mixing in these numbers, there are considerably more same-sex groupings than would result from choosing playmates at random. Children in the Maccoby and Jacklin research were also playing in same-sex groups 67% of the time by the time they were six and a half years old. According to Maccoby, youngsters seek out other students who have recognizable play styles, which is a method for assuring safety and predictability in an open environment. This presents a challenging chicken-and-egg challenge since it assumes that distinct play styles exist in the first place.

Because sex-segregated play groups have the ability to produce and reproduce this distinction, in addition to meeting a demand for predictable play and interaction patterns. It has been

conclusively shown that young males behave physically more aggressively than young girls. However, experimental and observational data show that this distinction occurs at the exact same time as the emergence of same-sex group preference. This play style is exclusive to same-sex groups and peaks in boys around the age of four, which suggests that there is a complicated relationship between the establishment of gendered play styles and of same-sex play groups. Boys and girls are socialised into separate peer cultures as a result of their separation for a significant portion of their childhoods, according to some gender theorists, who have proposed this theory in response to the separation of children in same-sex play groups. They adopt distinct behaviour, different conventions, and even different worldviews in their same-sex social networks. Boys and girls acquire separate cultures as a result of this separation, according to Daniel Maltz and Ruth Borker. They also develop different social standards for understanding social norms. They contend further that this may lead to male and female cross-cultural misunderstandings. Male-female miscommunication does not necessarily result from the division of gender cultures, but it does identify the circumstances under which it may. Undoubtedly, we may anticipate that boys and girls will acquire distinct practises and worldviews if they are often separated. The kind of segregation when, in what circumstances, for what activities - in connection to the actual interaction between boys and girls determines how much of this really happens[1].

This misunderstanding model is based on John Gumperz's research on subcultures with various ethnicities. It is hypothesised that men and women really have distinct conceptions of interaction, but crucially that they are ignorant of these differences and mistakenly think they are using the same conception. The gender views that most youngsters are diligently adopting in their social groups and outside of them emphasise difference, to the point of often comical exaggeration, making ignorance the most problematic assumption for this approach to gender-based misunderstanding.

The formation of gendered speech practises very probably involves some influence from gender segregation throughout infancy. But division is never the whole picture when it comes to understanding gender. Even when there are significant parallels between the activities or individuals being viewed, gender segregation is almost always ingrained in practises that group the sexes together and enforce different interpretations.

The difficulty of elucidating gender differences grows tremendously as we advance in development. Along with the balance between parent and peer influence shifting, peer influence itself also varies as children spend more time with and interact with peers in a variety of contexts. Peer culture grows more sophisticated as time goes on, and at some point, very early on, explicit beliefs about gender begin to influence children's preferences, chances, and choices.

Whatever the underlying causes of the growing gender gap may be, the gap itself develops into a social activity and a major problem. According to Barrie Thorne, public selection of teams for school activities prevents gender segregation; as a result, sports requiring team selection are more likely to have just one gender present, while games requiring only attendance or queuing up are more likely to have both genders present. guys' and girls' groups competing and competing against one another in primary school games like girls chase the boys are examples of how separation may manifest itself. With assertions that males or girls are better at the particular activity, these might be significant sites for the development of difference. In this manner, ideas about how men and women vary in their natural skills may be inadvertently and early absorbed,

seeming to be common sense. Therefore, it is not at all evident whether variations in behaviours and interests between males and girls are the product of social pressure or of personal desire[2], [3].

A very noticeable activity of matching boys and girls into couples starts to take over the scene around the conclusion of primary school. This activity is the start of a social market that serves as the foundation for the emergence of a peer social order, not one that is carried out by individual children or one that just appears in the middle of other childhood business as usual. In terms of gender separation and difference, this market has brought about a significant shift. During childhood, parents are often the ones who monitor children's behaviour. The peer social order grows and more assumes this role as it has the tools to organise its own social control. A heterosexual market serves as the hub of the emergent peer social order, and heterosexuality serves as the metaphor around which it is organized. Boys and girls now appear as complimentary and cooperative factions within the heterosexual market, in contrast to how they may have previously seen themselves as merely different and maybe incompatible.

The comparison to a market is not superficial since the heterosexual market is the first of many social markets that people in this age group will participate in before entering others, such the academic market and the work market. Girls and boys will learn to regard themselves as belonging to a formalized system of social judgement in this environment. Children who participate in the heterosexual market may play the roles of both commodity and broker; they can either be coupled up or negotiate the coupling up of others. The connections that are created on this market are at first transient; a couple may be together for a few hours, a few days, a week, or even longer. A system of social value is established by the speed of trades on the market. The market's ability to capture both participants' and spectators' rapt attention contributes to the formation of gender norms by recalibrating people's value in the context of heterosexual beauty[4], [5].

Considering that these interactions have nothing to do with attachments between the members of a couple, it is crucial to note that for the majority of participants, this activity comes before active heterosexual involvement, including dating, by a year or two. Prior to the actual commencement of overt heterosexual desire and action, the behaviours develop a structure and hierarchy of attractiveness. One's market worth depends on the matches that are made on their behalf; it depends less on the quantity of matches and more on the quality of the matches. The foundation of the developing teenage social order is the new and durable status structure that emerges around this market. In this sense, the social structure is basically heterosexual, drastically altering the gender roles within the cohort. What was formerly acceptable for boys and girls simply as males and females now categorises them in relation to a social hierarchy. Their respect for gender norms is the foundation of their worth as people and their relationships with others. And when the distinction between men and women melts with interaction between men and women, so does the divergence of these rules.

## DISCUSSION

The heterosexual market is not open to everyone, and not everyone who engages in it is heterosexual. The social order develops a presumption of heterosexuality via this market, marginalizing and labelling everyone who does not ultimately participate as abnormal. There are occasionally other markets on which to stake a claim to value and worth the academic market, for instance but the heterosexual imperative casts a very wide net and, given its dominant



position in the age cohort, it has an impact on everyone, including those who are strongly opposed to taking part directly. In other cultural settings, heterosexual partnering is not as prevalent or early in the development process. Even in the US, a few generations ago, such young children were not aware of the heterosexual market. Even in situations where the young people themselves do not play a highly active role in creating heterosexual connections, eventual marriage is a fundamental societal objective that signifies maturity in virtually all societies. Most societies have certain kind of institutions that center on young people's heterosexual desire and are connected to their future hopes for marriage.

In the US, the institution of adolescence and the formal institution of the high school that houses the age group are firmly ingrained with gender difference and heterosexuality. Popularity and heterosexual relationships are tightly correlated in high school, and famous couples benefit from increased exposure and offer entertainment for their peers. Things like mock elections with male and female equivalents for the most popular, most likely to succeed, and similar categories have often highlighted gender difference and isolation. These surveys convey the idea that success and popularity are gendered concepts, with distinct definitions for men and women. The traditional coupling of the football player and the cheerleader highlights the importance of the female standing by the male while he preserves the institution's honour.

The centrality of heterosexual partnerships is emphasised by the institutions of prom and homecoming king and queen, elevating such connections to institutional stature. Prom and homecoming have become into locations for the social sanctioning of same-sex attraction among teenagers in recent years. In 2010, same-sex couples made a big push for the right to attend prom. While many of these claims were successful, others resulted in legal action. A Mississippi school district was successfully sued by the American Civil Liberties Union for preventing a lesbian student from bringing her partner to prom<sup>5</sup>. When the ACLU filed a lawsuit, the school cancelled the prom, and the girl transferred to another high school to avoid persecution from other students who were upset that she had destroyed their senior year. And in 2011 at San Diego's Patrick Henry High School, a lesbian couple won the titles of homecoming king and queen.

### **Creating a desire**

Up to the birth of the heterosexual market, the focus has been on antagonism and difference throughout the evolution of gender. A significant shift in the nature of dichotomous thinking is brought about by the heterosexual market since suddenly, opposites are meant to attract. Whereas formerly male and female may have been in conflict, complementarity gives opposition a twist, and today they are allies. The conscious aspect of desire is now introduced to gender as a result. There are pictures of the ideal pair wherever we turn. They are straight and gay. He is larger, taller, and darker than she is. They are shown in stances where she is looking down or out in the distance while he is looking confidently and directly ahead. She is either lower than him when standing or sitting, maybe leaning on him, possibly tucked under his arm, and possibly even gazing up at him. The majority of children have also learnt to long for that ideally suited spouse of the other sex when they were very young.

Girls start to want to gaze upward at a guy. A female starts to imagine herself resting on his shoulder and him needing to kiss her or speak in her ear as he is bending down. She learns to weep so he can wipe her tears and she learns to feel terrified so she can have him protect her. Girls accentuate their little stature by dressing in big men's shirts. The cathexis, or concentration

of desire, is a very potent factor in maintaining the heterosexual gender order. It causes one to mould themselves into a certain mould as the object of that others' desire, rather than just having a simple desire for people in the opposite sex class. Boys grow to want to feel large and powerful, while girls grow to want to feel little and delicate. Or at least they are the most prevalent, socially acceptable versions of oneself, which may be uncomfortable in light of recent events like the expansion of girls and women participating in sports that need strength and often height or weight. Advertising and articles in magazines like *Sports Illustrated for Women* demonstrate that even the athletic young woman is advised to focus on making her physique appealing to males. Consumption of all types is motivated by want, and this desire is largely gendered. Diets, hair style, shaving legs or heads, hunger suppressants, steroids, tattoos, body piercing, cosmetics, and more are all in the service of the desired self. Everything from clothing to cosmetics to cars to houses to furniture to gardens to food to leisure activities is an extension of the self and is motivated by desire[6].

Thought to be innate, emotion and desire are really highly regulated and acquired. It is usually believed that males must learn to manage their emotions since it is forbidden for them to weep or express fear. This is undoubtedly the case, and several boys and men can speak to how challenging such control may sometimes be.

Following the horrific events of September 11, 2001, a lot of Americans saw guys from the New York City police and fire departments, who were plainly courageous and tough, openly crying for their friends and coworkers as well as for the many other people who perished in the World Trade Centre.

The news media started to speculate that a new age had arrived when males no longer had to hold back their emotions. Okay, perhaps. It is more probable that although there will still be gendered restrictions on sobbing and other emotional vulnerability manifestations, there will be a greater acceptance of men's tears in specific settings. We also often have relatively short memory of details pertaining to intimacy, emotion, and gender. According to John Ibson's book on the photographic representation of males during the previous century, men were often photographed during the Second World War in very personal stances that are now deemed gay.

The emphasis on how males manage their emotions ignores the significant socialization that goes into teaching women how to express their emotions to others, such as whether to weep or exhibit fear in front of others. It is acceptable for women to cry in public, for example, when a friend passes away, and it is acceptable for women to be afraid when they are in danger. In actuality, it is acceptable for women to express these feelings when reading or watching fiction. There are instances when girls and women force themselves to cry because they feel as if something hasn't affected them as much as it should, and maybe even to make themselves believe that it has. In action or horror films, acting afraid may be a crucial feminine ability. Gender-specific options to learning to be immune to fear in these circumstances include learning to be immune. The organisation of desire also contributes to the decision between these options. People learn to desire those answers and to be the kinds of people who have those responses, not just to have the right emotional reactions when the situation calls for them.

Boys and girls see themselves in various circumstances and adapt to those circumstances. Teenage heterosexual couples on dates are a regular sight in movies. When a sad or frightening scenario occurs, the girl runs into her boyfriend's arms for protection while covering her head in his jacket. He could give her a protective pat on the head or grin knowingly at her frailty. The



plot of the film gives the girl and the boy the justification they need to act out their gender roles and to activate the nuanced relationships between romance, heterosexuality, gender, and the theme of fear and protection.

Childhood and adolescence are not the end points for gender development. As we enter the workforce and learn to behave like secretaries, attorneys, managers, and janitors, gender continues to change. And it keeps changing as we learn how to become spouses, husbands, parents, aunts, uncles, sisters, and brothers, as well as grandparents and great-grandparents. We continue to discover new ways of being men and women as we get older; for example, what is required of a teenage girl is quite different from what is expected of a woman in her mid-forties, and those expectations are different from what is expected of a woman who is nearing eighty. Gender expectations still apply to those who are not involved in heterosexual relationships. For instance, lesbian personal ads often state that applicants should seem feminine; no butch applicants are required. As we've seen above, being male or female entails learning certain ways to appear and behave, engage in relationships and societies in certain ways, and see the world from certain perspectives. We have a tendency to believe that many of our customs, values, and views are simply the outcome of our own histories rather than how we fit into the societal structure.

The social order shapes our experiences, however, so there are probably patterns to who develops what. Habits, preferences, and beliefs all grow out of experience. The fact that some men weep easily while others may never cry does not imply that men or women are homogenous groupings. Not everyone follows the prevailing script. But how we mature never just results from the simple unfolding of our inherent inclinations; rather, it constantly reflects exposure to standards, opportunities, and expectations that rely on gender and other social categories. Of course, learning about social identity in this developmental tale involves more than just gender. Interactions between gender and other hierarchies based on social constructs like class, age, ethnicity, and race include racialized sexism and sexualized racism. This whole section might be rewritten with an emphasis on how children learn their financial level, race, ethnicity, and even their physical shape and reading skills. We might also redo the whole section to account for every potential intersection of gender, class, colour, and all the other socially relevant categories we could think of, since, of course, humans perceive intersections of hierarchies, not isolated elements[7].

Naturally, the rewrites would highlight intriguing and significant variations in the way gender and other categories are formed. Importantly, the heterosexual market and the larger heterosexual drive, as well as the strong gender polarization and ideas of gender complementarity they foster, do not truly have an equivalent. While there are instances when race and class do control some parts of family life, race and class norms generally do not function in this manner. Gender norms aim to instill a desire for a mate of the other sex. One way that gender and race or class interact is that there are enormous pressures to locate a spouse of the opposite sex who is of the same race or class. And although racial or socioeconomic variety among families is very uncommon, gender and age categories systematically shape family life. Gender connections, according to Rudman and Glick, entail ubiquitous intimate heterosexual interdependence, often accompanied by genuine feelings of love and affection between the sexes, sensations that contribute to explaining some of the ambiguity that is inherent in beliefs about gender.

However, despite the fact that social hierarchies interact and have an impact on one another, and gender varies significantly from other principles of social division and inequality in this regard, discussing any one of them in isolation runs the risk of being inaccurate. For instance, it is unquestionably true that not all ethnic groups share the above-mentioned necessity that women be slender, which is particularly prevalent in the US among the white middle class. Several important ideas have been brought up in this developmental story. First, gender is undoubtedly learnt. Gender must also be taught and enforced since it implies a limitation of choice, stringent behavioural guidelines for everyone, and asymmetries. The second concept, that gender is collaborative, follows from this. It's customary to conceive of gender in terms of personal characteristics: a person is either male or female, more or less masculine or feminine, and performs tasks often associated with either sex. This emphasis on the individual hides the truth that gender cannot be achieved on its own. Although gender involves people's perceptions of their own gender identities, it is largely a practice that links the person to the social structure. As we've seen, children first learn gender by having others act it for them before finally taking ownership of both their own performances and the performances of others. This support entails some direct coercion, but most of the time, gender is so ingrained in our behaviours that even the simplest acts and interactions often elicit gendered reactions in others with little to no conscious effort on their part[8].

This brings us to the third concept, which states that gender is something we do rather than something we have. Children often exhibit gender fairly purposefully; the mincing girl and the swaggering guy are clearly putting on gendered displays. They grow more adept at hiding their unpolished presentations as they age, but more significantly, their gendered performances also become second nature. The reality is that gender involves effort, and when it is not applied consistently at all societal levels, it may wither away. Finally, gender is asymmetrical. It is this element of gender that inspired Judith Butler to develop her theory of gender performativity, which we will cover in more detail in subsequent chapters.

There is no denying that male and female are not just the two equally valuable sides of a coin, regardless of how one may feel about the existing gender hierarchy. At the most fundamental level, gender is inherently unequal. In fact, Kate Bornstein has said that using gender as a justification for inequality is false. Sherry Ortner offers a more complex view of gender, observing that there are generally different axes of social value or prestige operative in a given society, with men ahead on some and women on others, but that some axes are more deeply embedded in social logic. Harriet Whitehead and Sherry Ortner make a similar argument for the universality of beliefs in male superiority by saying, gender system is first and foremost a prestige structure. Power and influence do not necessarily exactly correlate with prestige, which is a related but equally essential topic[9], [10].

## CONCLUSION

The heterosexual market is also examined in this chapter in relation to a number of variables, including globalization, urbanization, and media influence. These factors have significantly influenced how society views relationships and romance, which has paved the way for their monetization. Furthermore, the market's heteronormative character raises significant concerns regarding diversity and representation. Businesses are under growing pressure to diversify their marketing approaches and take marginalized people' viewpoints as social awareness rises. In conclusion, the heterosexual market is a complicated ecology that is impacted by cultural norms,

modern technology, and shifting perspectives. For companies and politicians alike, it is crucial to comprehend the trends, dynamics, and sociocultural implications of this market in order to promote more inclusive and relevant ways to address the varied demands and ambitions of this sizeable group.

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## CHAPTER 3

### Challenging the Gender Hierarchy: Promoting Equality and Inclusion

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#### ABSTRACT:

Power dynamics, personal experiences, and social standards are all still shaped by the preservation of the gender hierarchy, with its deeply ingrained patriarchal framework. The purpose of this chapter is to clarify the processes by which the gender hierarchy is maintained and the extensive effects it has. Many ways that civilizations maintain established gender roles and practises by drawing on multidisciplinary research. The gender hierarchy is reinforced and perpetuated by social institutions, media representations, and cultural narratives, which place expectations on people based on their ascribed gender identity. The chapter also explores the psychological mechanisms that help people accept and internalize the gender hierarchy. People are exposed to gender stereotypes from an early age and urged to fit into predetermined gender norms, which normalizes uneven power relations. A key topic of this debate is how the gender hierarchy intersects with other forms of oppression including racism, classism, and ableism. Understanding the entire complexity of gender-based social control requires an understanding of how these overlapping systems reinforce and support one another. The chapter also examines how the gender hierarchy affects the economy. The gender hierarchy sustains economic inequities as seen by gender-based salary discrepancies, women's restricted access to leadership roles, and the undervaluation of historically female-dominated professions.

#### KEYWORDS:

Development, Female, Gender, Male, Women.

#### INTRODUCTION

The prevalence of gender is one aspect of our development story that is overpowering. Gender is ingrained in children everywhere. Gender is a set of relationships that form through time to define male and female, masculinity and femininity, and to structure and control how individuals relate to one another and to society. Every part of society is heavily ingrained with it, including our institutions, public areas, art, clothes, and movement. Every environment, from government offices to street activities, has gender ingrained within the experience. It permeates every aspect of life, including going to the toilet, dining out, strolling down the street, and attending church and school. And there is a logical connection between each of these contexts and circumstances. There is something close to a seamless relationship between a girl's desire for a frilly party dress and the male ownership of the means of production since gender is so finely organized at every level of experience.

What we see as our unique, maybe irrational impulses come into being within a vast gender system that both supports and is supported by our desires. This seamless relationship between language and gender and vice versa makes it so significant. Even the tiniest of our relationships may be infused with gender, and as long as we consistently behave in those interactions, gender

is supported. Every time a young girl wants, demands, or wears a frilly pink party dress, she engages in gendered behaviour that perpetuates the gendered connotations attached to the colour pink, frills, dresses, and party attire. The little child who insisted on putting on filthy dungarees had a different impact. Interestingly, however, individuals often ignore what they perceive to be outliers in order to minimise the long-term impact of the nonconforming girl's activities. This section's goal is to provide some explanation for the relationship between the pink party dress and male institutional dominance description of how gender normativity and male dominance are structured.

We start by stating once again that dichotomous gender is at the core of our social structure because we maintain it there. Males wearing blue and females wearing pink is not necessary for human existence since we are a reflecting species that can communicate with one another. The ongoing distinction between male and female serves to confirm the social structures that rely on the categories of male and female, rather than to ensure biological reproduction. Because creating and maintaining these dichotomous categories is a continuing human endeavour, language will be treated differently in our research of gender and language than just as a reflection of already-established categories[1], [2].

### **Ideology and custom**

The gender order is a framework for allocating rights and duties, liberties and restrictions, limitations and possibilities, power and subordination based on sex-class assignment. The frameworks of tradition, ideology, passion, and desire all sustain it. It is often hard to distinguish between gender and other facets of life since they are so intertwined.

The strength of convention, or custom, resides in the fact that we just pick up ways of acting and behaving without giving them much thought or understanding the wider frameworks they fit into. Although convention is always evolving, society's members often see some traditions as timeless, essential, and essential to maintaining order. The perceived timelessness of tradition is a key characteristic. In fact, erasing the real conditions under which the specific practice in issue originated is a component of the conventionalization process. For instance, we always use Mr. and Mrs. Jones instead of Mrs. and Mr. Jones and husband and wife instead of wife and husband. Even if it is a matter of tradition, it was initially decided that males should be addressed before women due to the dominance of men. In the sixteenth century, grammarians claimed that men should be listed before women because

Ideology is a set of ideas that individuals use to analyse and evaluate other people's behaviour as well as their own and their own behaviour. Gender ideology refers to the body of ideas that individuals use to explain and justify their involvement in the gender order. Different gender ideologies have different views on the nature of men and women, as well as the fairness, necessity, naturalness, and origins of key components of the gender order. Whether difference is essential, whether it should be preserved, and whether it can or should be maintained with or without inequality are all topics of debate among ideologies. Some people see difference as a fact that justifies or is an inevitable outcome of inequity. Some believe that differences are created to promote hierarchy. Some people believe that maintaining the gender hierarchy is morally required because it is either a result of divine design or is merely a matter of convention. Others see it as a convenience, with the mentality that if it isn't broke, don't fix it. Of course, one's viewpoint will determine if anything is broken or not.

### **Essences and the dichotomy's nature**

The terms in which the male-female dichotomy is publicly understood and frequently justified are briefly described before we get into our discussion of the gender order. These terms represent some of the main aspects of the dominant gender ideology in our society. The following collection of oppositions is likely to be produced by members of any western industrial society: Men are direct, men are indirect; men are competitive, women are cooperative; men are practical, women are nurturing; men are rough, women are gentle. Men are strong, women are weak; men are brave, women are timid; men are aggressive, women are passive; men are relationship-driven, women are sex-driven; men are impassive, women are emotional; men are rational, women are irrational. The list continues on forever, and when these oppositions are combined, they create the ideal man and ideal woman. Although many people or organisations reject any or all of these as accurate descriptions or as standards to strive for, almost all of our readers will be able to see that they are a part of a widespread perception of male and female. The prevailing worldview asserts that men and women are simply different, rather than just suggesting that they should be. Furthermore, it attributes these variances to a constant fundamental difference between men and women. Essentialism is the name given to this perspective[3], [4].

Both their position within gender ideology and the extent to which their representations pervade society both contribute to the tremendous force of these oppositions. First of all, the oppositions seem to be a package deal with one having an explanation hidden somewhere in the others. Although the individual oppositions are not fundamentally related when we look at them carefully, the web of connections that makes up gender has connected them in the minds of the general public. It may seem obvious how stature, physical strength, and boldness are related. However, there is no obvious correlation between physical prowess and aggression, nor is there any correlation between any of these traits with competitiveness, emotionality, directness, reason, or any other trait. For instance, the connection between impassivity and rationality presupposes that a person who is emotional cannot simultaneously be logical, suggesting that emotion includes a loss of control and reason. What type of perspective does this have on emotion? The reader would do well to research any potential links between these opposing viewpoints and look for them in the prevailing worldview.

### **DISCUSSION**

The popular English phrase the opposite sex illustrates how pervasive the idea that male and female are opposites is. You seldom ever hear an alternate phrase like the other sex or another sex. Gender oppositions, such as the gender gap and the war of the sexes, put more emphasis on potential for conflict, incomprehension, and mystification than just on differences. However, when male and female groups in the heterosocial business start working together, resistance is enhanced by the idea of complementarity. The concept of complementarity, which is seen in phrases like my better half, emphasises interdependent roles and characteristics and hints at some kind of ecological need. According to the concept of attraction and the idea that one needs the other, it is this clear gender divide that maintains the balance of society. Social theorists refer to functionalism as the idea that gender disparities serve fundamental social functions that keep society operating. It is a crucial aspect of the prevailing gender ideology and a significant player in the debate on conservative gender.



Gendered oppositions are pervasive, infiltrating human experience by showing up in a wide variety of places and ways. We discussed the societal dynamics that exaggerate the statistical size difference between men and women earlier in this chapter, as well as the function of media representations of the male as the towering figure in inspiring desire for a specific sort of spouse. Even though women are generally shorter than men, the fact that only a tiny percentage of heterosexual marriages have a guy who is really shorter than the woman speaks to the pervasiveness and influence of gender stereotypes. These oppositions' potential for embedding serves as yet another means of reinforcement. For instance, the opposition larger-smaller functions both inside and between the male and female categories to distinguish between them. Women who are enormous compared to other women are seen as less feminine, while men who are little compared to other men are seen as less macho.

Fractal recursively is the term used by Susan Gal and Judith Irvine to describe this nesting of the overall opposition inside each of its constituent parts. Due to people's propensity to compare themselves to members of their own gender rather than members of the opposite gender, reflexivity offers a particularly potent force in the enforcement of gender. Inferior guys are those who are seen as being feminine. While some people may see women who are perceived as being masculine as being inferior, others may regard them as aspire to a desired male identity. One explanation for why masculine behaviour in women is often stigmatized less than feminine behaviour in males is due to this. In particular for boys and men, the relationship between gender and heterosexuality also causes the association between gender-atypical behaviour and homosexuality. In contemporary western countries, regulating gender and policing sexual preference go hand in hand. The four-year-old youngster may be persuaded to choose stripes for his curtains instead of flowers since his father doesn't want him to become homosexual[5], [6].

### **Dividing up the work**

The above-mentioned conventional gender oppositions are intimately related to a division of labour that penetrates society on all levels. The division of labour here includes not just cerebral and physical labour, but also emotional labour. Of course, no division of labour is just a division of activity, as activity governs factors like associational patterns, mobility, and spatial utilisation. In turn, the gendered characteristics that define the oppositions are often demanded by, and even ingrained by, the division of labour. For example, people who are responsible for meeting the fundamental needs of others can only do their tasks effectively if they are other-oriented and pay great attention to indications from those others about the status of their minds and bodies.

A division of labour may also be a division of value to the degree that certain tasks and fields have more authority and reputation than others. Different levels of power and prestige are involved in the gendered distribution of labour throughout all civilizations. Men's actions, which are tightly guarded as being exclusively within their purview, confer more social authority via the distribution of commodities and services and the management of ritual. In most countries, men have more access than women to positions of public influence and authority. Although women sometimes have a lot of power in private or other non-public spaces, their power is constrained by the space itself. The status of the domestic lady in the social order ultimately depends on the location of her male relatives' jobs in the workforce since the private sphere depends on its place in the public sphere. And how these guys distribute the items they acquire in the marketplace will determine her capacity to wield power and influence in the private sphere.

In western civilization, women's roles are mostly assigned to the home sphere, or the private sphere, while men's roles are assigned to the public sphere. This labour divide is often linked to reproductive duties. In addition to carrying and giving birth to children, women are responsible for raising them, nurturing not just individual children but also whole families, and taking care of the house where families reside. Women would give birth to and care for children while males would not if there were a division of labour based only on gender. Additionally, women who are pregnant or breastfeeding may find that their other activities are somewhat limited. Beyond that, however, a sex-based division of labour does not follow from reproductive function, which for the majority of women is either very transient or nonexistent over their lifetimes. However, the traditional justification for the sexual division of labour in all sorts of contexts is the distinction between the biological necessities for motherhood and fatherhood. Of course, more than simply reproductive ability is used to support the gendered division of labour; for a long time, women were prohibited from working in specific fields because they were seen to be underqualified.

Certain tasks requiring unusual strength might, for example, fall to people of great strength, many of whom would be men but some of whom would be women. Different sex balances in the attributes needed for success would, in turn, result in different sex balances in the allocation of tasks. However, cultures all across the globe have complex divisions of labour and obligations based only on the designated gender, paying absolutely no consideration to real reproductive activity or size. And in many places, the gender-based distribution of labour is not even related to size or reproductive activity, if at all. Therefore, it should not come as a surprise that although there is a division of labour, its specifics are not uniform. In some societies, what is seen as men's labour or a man's function may be regarded as a woman's duty in another.

In the distinction between the private and public spheres, women are often in charge of taking care of people's basic requirements, such as clothing, feeding, cleaning, and caring for children, as well as regularly maintaining individuals and their living spaces. While the majority of women in the west do work outside the house today, many of their vocations are extensions of their domestic function. Until recently, this separation prevented many women from working in the public sector. Teachers of young children, nurses, secretaries, and flight attendants are examples of traditional employment for women that are in the service industry and often entail caring, serving, and support duties. There is also a division of labour in terms of emotions. Women are more often expected than men, wherever they are, to remember anniversaries, comfort upset children, and show deep understanding. Men, on the other hand, are more often required to make judgements, provide advice and knowledge, or solve technical issues.

One could go on and on with this list: salespeople sell computers, men's apparel, and hardware. Women may sell any piece of men's apparel, but men seldom sell gowns or lingerie but may sell women's shoes. Saleswomen market kitchenware, intimate apparel, and flowers. Women build things out of Fibre, whereas males build things out of wood and metal. Women participate in solitary sports that do not include physical contact whereas males play contact sports. Men take care of the garden work, the automobiles and the house maintenance at home while women take care of the cooking, cleaning and childrearing. With regard to both current events and preconceptions, the reader might continue to add to this list indefinitely. However, change is also evident. Women are becoming more active in combat sports like boxing, wrestling, and kickboxing. They are also joining the police and fire services in larger numbers, eventually becoming leaders of both departments. And it's undeniable that there are more women in leadership roles across the board. However, there are still many disparities and injustices[7], [8].



Connections between the division of labour and the supposedly defining characteristics of men and women that sustain that divide turn out to be problematic. The word nurturing tends to be associated with women's activities. While a male grilling is not seen in nearly the same manner, a woman cooking is perceived as taking care of her family. Males's activities may gain prestige only by being associated with males, regardless of their intrinsic worth, just as women's activities are often seen as nurturing even when their goal or impact may not be nurturing. Despite the fact that males still predominate in professional cooking, especially in haute cuisine, most household chefs are still women. When women begin to hold formerly male-only positions of power and prestige, this process of gendered judgement becomes clear. This was vividly shown during World War II, when military conscription forced males out of various occupations and women into those positions. Women became tellers at banks.

A position that was solely open to males in the pre-World War I period since it was believed that only men were capable of managing enormous quantities of money. After the war, women continued working as tellers, which were seen as women's employment and generally low-paying clerical labour. The creation of hardware was seen as the challenging and masculine task, but computer programming was first seen as clerical job and was mostly carried out by women. Six women worked on the ENIAC computer's programming when it was developed in the 1940s, and until the 1960s, when it became evident that programming was challenging, women continued to handle the majority of the programming.

At that time, a number of overtly discriminatory actions began to masculinize the programming field. A fascinating time limitation is also brought on by the household function. The daily upkeep of a family, including duties like feeding, cleaning, and clothing others, is always refreshed and permeates time. As a result, the constant demands of other people have historically dictated how a woman spends her time.

On the other hand, the duties that men often do in the home realm of the middle class are cyclical. The removal of garbage, maintaining the garden and performing repairs are all things that may be planned in advance to work around other commitments. Women find it harder to commit to business activities with the same fervour as males as a result of the disparity in time demands.

Female confinement to private space and male dominance in public space are frequent manifestations of the domestic role of the woman. The confinement of women's and girls' activities to the house extends to both physical space and activity, while men and boys not only have more responsibilities outside the home but also have more mobility and access to public spaces. One of the customs that traditionally combined gender and class is the exclusion of women from public settings. Nice ladies didn't read the newspaper, attend speeches, or hang around in public areas during the Victorian era in England. In this context, nice is identical with superior. Families in lower-income brackets often do not discriminate in this manner, but the richer classes have always been able to leave a portion of their people unemployed.

Poor Victorian women worked in the market, went out into the world, and were aware of what was going on in society. They were not considered nice by the standards of the ruling elites because of their financial limitations. This illustrates the point made earlier in the chapter that gender cannot exist in a vacuum from other important social categories, in this instance class. Today, women from all social groups do engage in many forms of public life. However, they

continue to get regular reminders that they do not belong there and that they are constantly in danger, whether it be socially or physically[9], [10].

Even in activities deemed suitable for women, the public dichotomy has repercussions. Women in the Victorian era were encouraged to pursue the performing and artistic arts, but only in secret. The reason there are so few great women painters, according to Linda Nochlin's research, is that only males were permitted into studios during a time when the great creative topics were religious and the human body was the main focus of creativity.

As a result, women were unable to acquire the abilities required to create the kinds of artwork that made Rembrandt renowned. Later impressionist paintings emphasised topics in settings that women did not have as much access to, such as bars, backstage at ballets, and brothels. Since they had access to these settings, the two most well-known female painters of this era, Mary Cassat and Rosa Bonheur, mostly painted domestic scenes with women and children in their houses. It can't be a coincidence that these particular subjects were deemed unworthy of great art.

### CONCLUSION

Promoting gender equality and a more inclusive and fair society has been made possible through grassroots activity, feminist movements, and governmental improvements. The effects of keeping the gender hierarchy in place at different levels. People who don't conform to conventional gender standards may encounter prejudice, marginalization, and violence, which may harm their mental health and general wellbeing.

Inequality may also be sustained by individuals who profit from the current power system by continuing detrimental attitudes and behaviours. In conclusion, adopting successful tactics to fight gender-based discrimination and inequality requires a knowledge of the processes behind the persistence of the gender hierarchy. Recognising the long-lasting effects of the gender hierarchy as well as the opportunity for change enables people and society to pave the way for a more equitable and fair future.

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## CHAPTER 4

### Exploring Diverse Femininities and Masculinities: Beyond Stereotypes

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#### ABSTRACT:

Beyond the standard binary conceptions of gender, femininities and masculinities indicate the broad and complicated variety of gender identities that people exhibit. The multidimensional nature of femininities and masculinities is thoroughly explored in this chapter, along with how society constructs, expresses, and interprets them. Femininities and masculinities are described as social constructs that span a range of gender identities outside of the traditional categories of male and female. This investigation explores the ways different identities interact and overlap, demonstrating the fluidity and flexibility within each by challenging the conventional concept of gender. This chapter's main theme is how culture and society shape ideas of femininity and masculinity. The development of gender norms and roles is influenced by socialization processes, media portrayals, and societal expectations, which in turn affects how people express their gender identity. This chapter also discusses how patriarchy and power relations affect how femininities and masculinities are constructed and reinforced. The persistence of hierarchical gender relations, which impact not only individual behaviour but also institutional practises and societal structures, is caused by the presence of dominant and subordinate versions of these identities. Another important topic covered in this chapter is how femininities, masculinities, and sexuality concepts interact. Gender identity and sexual orientation interact to show complex relationships and refute preconceived notions about gender and sexuality.

#### KEYWORDS:

Femininities, Gender, Girl, Masculinities, Physical.

#### INTRODUCTION

Compared to, say, a male born into the white upper middle class, a woman born into the black working class has a totally different life experience. This unique experience has given me new information, possibilities, and perspectives on the world. The collection of ideas and dispositions that a person acquires as a consequence of his or her collected experience in a given area in society is referred to by Pierre Bourdieu as habitus. People will see and experience various things, know different people, and gain different knowledge and skills depending on where they are in society. And they will participate in various discussions while having various dialogues and hearing various talks. Discourse is the socially significant activity most often words, but sometimes nonverbal actions in which ideas are gradually formed. When we discuss a discourse, we are referring to a specific history of conversation around a certain subject or group of ideas. Thus, when we discuss a gender discourse or a variety of gender discourses, we are referring to the operation of a certain collection of gender-related concepts in some portion or parts of society.

Every social position has its own viewpoint, just as every individual has different interests. People's perceptions of what is morally correct, appropriate, and beneficial to them, others around them, and the world as a whole are likely to vary. No information, truth, or piece of common sense can exist without being influenced by a person's position and the interests that come with it. Ideology, as we defined it earlier, is a set of beliefs that are applied to individuals and their actions in order to explain, defend, interpret, and assess them. Some individuals don't differentiate between ideology and speech since they are both projections of the interests of people in a certain social setting. Others reserve the term ideology for a discourse that involves a central power struggle.<sup>16</sup> Terry Eagleton contends that A breakfast-time quarrel between husband and wife over who exactly allowed the toast to turn that grotesque shade of black need not be ideological; it becomes so when, for example, it begins to engage questions of sexual power, beliefs about gender roles, and so on. But we easily move from a discourse to an ideology in Eagleton's terms.

Discussions of gender take place in both explicit and discourse about items that may be grafted on to gender. Men's lack of skill in the kitchen and women's function as chefs become the main topics of conversation if enough people laugh about, it often enough. Since these issues often come up in jokes, they have an established status as old knowledge rather than a hot topic, which helps to normalize the association between gender and kitchen activities. The effects extend well beyond the kitchen of the average household. A female assistant who makes poor coffee in an office setting where making coffee is required of assistants is likely to be seen as less competent than a male assistant. He will be excused on the basis that he was asked to do an unnatural duty, whereas she will be considered as being unable to perform a natural function. Men who cook at home or help with child care sometimes get more praise than women since they are perceived as going above and beyond what is required of them[1], [2].

When we stop questioning how we think, which occurs when ideas appear often enough in daily speech, we stop questioning their origin. A discourse may have a privileged position in society due to the influence of those who participate in it. By virtue of the position of its original proponents, a discourse can erase its history as it spreads, concealing the fact that it is ideology. It can be heard in more places, get more airtime associated with voices of authority, and as it permeates institutions, it comes to pass as knowledge, fact, or common sense. A top-down power play may impose an ideology, as was the case with the Afghan Taliban administration, which legislated the harsh subjection of women. However, this kind of compulsion is only required when significant portions of the populace recognised the clash with their own ideals. We call this process naturalization. A dominant ideology usually owes its success not to raw force and intentional imposition, but to the capacity to persuade others that it is in fact not a question of ideology at all, but just natural, the way things are. The word naturalization in this context refers to people's perception of what is self-evident rather than necessarily to biological naturalness.

### **Institutions**

Age, class, gender, and ethnicity are some of the categories that define our civil status, as well as our rights and duties, and they exist on paper because they are ingrained in our official institutions. Some of the categories may become more or less significant as society evolves, and our institutions may alter how they are written. Negro, a racial classification based on the purported presence or lack of African blood, used to be an official classification that determined one's legal status in several US states. Although this racial category's particular status has

evolved over time, it nevertheless has legal protections for population surveillance and widespread informal acceptance in American culture. Even less dependent on biological factors than sex and gender, this racial group is a social construct. The true standard for determining one's race has always been physical appearance or knowledge of one's ancestors' physical characteristics. One cannot tell someone has African blood, and this standard has never changed. Of fact, defining physical traits as African is entirely subjective in and of itself. The experience of being Black, White, or Asian is what counts, and race continues to be ingrained in our discourses on identity and personhood.

The gender order has an official locus that is created by the gender regimes of various global entities like governments and companies. Women made up a very small portion of both the government and business until the 20th century. Women in the US did not get the right to vote until 1919, and when they progressively entered the business world, they worked in very low-level positions. A less loving and infantilizing atmosphere is required since even at the beginning of the twenty-first century, women made up a very small percentage of the Chief Executive Officers of America's Fortune 500 firms. Men may join the female educational workplace in a manner similar to how women entered corporate management, but rather because they can introduce significant masculine improvements to educational practise. As the subject matter becomes increasingly technical, educational institutions see a similar gender shift. Women are more likely to teach the humanities and, to a lesser degree, social science in our culture than males are to teach science, math, and technology. Women are more likely to be biologists than physicists, even within the sciences. This intellectual division of labour is linked to idealised gendered body and personality types via the metaphors of hard and soft science; in this instance, men's rationality is brought to the forefront. In this sense, essentialist notions of males as logical and women as more nurturing are ingrained in our academic institutions and how we discuss them.

Baby showers, sweet 16 parties, and stag parties are examples of informal institutions that have become established practises in addition to official ones. The reader can reflect on how many of these institutions are gender-neutral. While many institutions adhere to formal structures, they are nevertheless often informal. Arguments about what exactly makes a family highlight the complicated institutional position of the family. Some people claim that marriage is the moral and legal basis for a family. According to this perspective, marriage formally recognises a heterosexual partnership between a man and a woman. It also assigns parental responsibility for any children they may have, making the husband, wife, and children the core of the family. Some claim that a family is any adult or committed couple of adults living together and raising any children they may have. Others believe that a family is any extremely close friend with whom they share their life but not necessarily their homes. Since the family is the major site of social and biological reproduction, the question of what defines the institution of the family is at the centre of debates of gender. The complementary responsibilities of father and mother are often emphasised in discussions about raising children, along with the child's purported need for each[3], [4].

The discussion around same-sex marriage focuses less on children and families and more on civil rights, namely the ability of same-sex couples to experience the financial and legal advantages of marriage. The freedom of gay and lesbian couples or single gay men and lesbians to adopt and raise children sparked the parenting debate earlier. Even yet, the Supreme Judicial Court of the Commonwealth of Massachusetts rejected the state's ban on same-sex marriage in its historic



Goodridge decision on November 18, 2003, citing concerns about children's welfare as one of its justifications. The Court also ruled that it cannot be rational under our laws to penalise children by denying them of State benefits because of their parents' sexual orientation while noting that the sine qua non of marriage is the exclusive and permanent commitment of the marriage partners to one another, not the begetting of children.

## DISCUSSION

Earlier in this chapter how readily generalisations about gender might obscure the variety of gender experiences. Gender is everything from homogeneous since social practise varies greatly throughout different civilizations. There are several places where men and women are not equally dimorphic. They aren't either defined or experienced universally. The idea of true masculinity, which emphasises that masculinity is a component of a wider system rather than a whole itself. Connell identifies and expands on two types of masculinities, the working-class physical masculinity and the upper-middle-class technical masculinity, using this framework as a starting point. Working-class masculinity, according to Connell, is linked to physical strength, while upper-middle-class masculinity is linked to technical strength. This is not to suggest that physical strength is insignificant for upper-middle class men; in fact, society as a whole view's physical strength as part of the male ideal. The foundation of working-class masculinity, however, is physical strength, while the male strength seen in the corridors of technical authority is only partially physical. The fact that technical men command the physical power of other men of men in the physical market is more significant than the fact that they benefit from having a certain level of own physical strength.

The physical strength of the technical guys who govern things comes from armies and labour forces. Men's physical strength is also constrained by the technological context's refining requirements. A technological guy must have smooth motions, clean, uncalloused hands, and a trim build while wearing a suit. Although there has long been conflict between these two forms of masculinity, the rise of high-tech wealth appears to be weakening the link between masculinity and physical strength as more and more wealth is concentrated in the hands of those who have clearly defined themselves as brainiacs. For women, there is a comparable reversal of classes. Women of social standing are supposed to be petite and delicate, with meticulously kept bodies. This delicacy is anticipated to some degree of all women, just as physical strength is to some extent expected of all males. There is less emphasis put on certain physical delicacies, however, since physical labour and the capacity for self-defense are vital to many working-class women, both at work and outside of it [5], [6].

For many individuals, ignoring the diversity of masculinities and femininities results in the erasure of experience. For instance, psychologist Carol Gilligan and her colleagues discovered that as girls approached adolescence, they became less confident in themselves, less assertive, more deferential, and generally lost the sense of agency that they had as children. The study involved girls attending the private Emma Willard School in the eastern US. This girls' confidence crisis has evolved into a well-known gender construct and a type of need for girls' growth. According to statistics, white middle-class girls, like those who attend the Emma Willard school Gilligan et al. focused on, are actually more likely to experience this kind of crisis. However, this is a very minor portion of the population. The little data that are available on African American girls at this similar period of life indicate that they do not experience such a crisis; rather, they seem to develop a feeling of personal confidence. We contend that there are

discrepancies between the gender discourses of European Americans and African Americans, notably with regard to heterosexuality. Middle-class European American girls are often brought up in a language of female servitude and material dependency on males, especially when it comes to child-rearing.

On the other hand, African American girls are often brought up in a discourse of female efficacy, with the assumption that they would be fully responsible for both herself and their offspring. The onset of the preadolescent heterosexual market that we previously mentioned coincides with the age at which the Emma Willard girls start to lose their sense of autonomy. Discourses about gender and heterosexuality start to influence children's perceptions of their position in the world as they start to consider themselves as actors in a heterosexual market.

Middle-class European American girls may feel disempowered as a result of the heterosexuality discourses they are exposed to, while African American girls may feel empowered. In fact, instructors are acutely aware of the fact that many African American girls exhibit a marked increase in assertiveness during this time. However, because assertiveness does not conform to the predominant female gender standard, educators often link this assertiveness to race rather than gender. It is much too simple to extrapolate from one group's experience due to the presumption that gender experiences are universal.

The fact that the girls' experiences are white and middle class, rather than African American and working class, is also no coincidence[7], [8].

Due to their position in society, certain people's actions and gender discourses will have an even greater worldwide impact. Because nice girls tend to be submissive, timid, and cautious, girls experiencing the preadolescent crisis of confidence that Gilligan describes actually characterise typical girlhood at that age. As a consequence, many African American girls at that age are criticised for their more aggressive behaviour, which is seen as unsuitable and unfeminine. Because white instructors see African American girls' behaviour as disruptive, they are routinely marginalized in schools. Ironically, despite efforts to support girls who are experiencing the now-famous crisis of confidence, it is not commonly accepted that these girls should emulate their African American sisters. Instead, programmes are being developed for African American girls to assist them in overcoming a crisis that they may not really be going through.

This effectively makes African American women and girls invisible in debates that generalise gender. The idea that preadolescent females have a confidence crisis erases analogous crises in boys as well as the African American experience, which often does not include this specific crisis. The behaviour of many African American girls is non-normative and hence seems violent and dangerous to certain people because it deviates from the stereotype of hegemonic femininity for this age group, which is one of a lack of confidence and a generally unsteady and self-subordinating demeanour. Although gender will be the main topic of this book, we will make an effort to keep in mind how crucially connected it is to other social categories. No one has a fixed gender identity. None of us are just black or white. No one has a pure wealth or poverty. Anyone may be either young or elderly. Talking about gender as if it were apart from other classification systems and the oppressive and privileged structures, they uphold would essentially negate the wide spectrum of gendered experiences and instead tend to concentrate on what we are most used to. This is already dangerous, but facing a threat is always preferable than ignoring it.



## Practice of gender

It is difficult for us to live our lives without exhibiting gendered behaviour, and it is also impossible to avoid doing so due to the influence of gender categories in society. The preservation of gender categories also relies on reinforcement in daily behaviour. If we did not engage in sufficiently gendered and gendering behaviour that is, if different groups of individuals did not keep acting like women and men, respectively male and female could not continue to exist as structurally significant social categories. In other words, social categories and the gender hierarchy. When highlighting the traditional component of activity and its connection to social structure, we use the word social practise to describe human action. Structure limits practise, but it does not define it. On the one hand, individuals may act in ways that are consistent with the structure that already exists; for instance, a married woman may choose to raise her children at home while her husband works to provide for their financial needs. People who act in this manner perpetuate the current social structure.

Contrarily, a woman may choose to have children on her own, another woman may decide against having children, a heterosexual couple may decide against having children, or a gay couple may elect to have children. If just a small number of isolated individuals act in one of these ways, the impact on social structure will be minimal. As these lifestyle decisions have increased in popularity, they have developed into established practises. The recent emergence of such unconventional practises has helped to alter the definitions of male and female, the gender hierarchy, and the social structures that in turn influence gender practises. Additionally, it has aided in the creation of fresh identity categories and labels for them, some of which are covered. persons who affirm non-normative sexual or gender identities might pick from a variety of labels, Some of which are derogatory, including gay men, lesbians, bisexuals, transgender and intersex persons, gender-queer people, and many more. Sometimes the alphabet soup moniker LGBTIQ is used to everyone who doesn't cleanly fit into a heterosexual and gender-conforming mould. We make an effort to utilise labels that appear pertinent to the situation at hand[9], [10].

Change is always possible since structure and practise are in such a dynamic and dialectical relationship. One may argue that the social order is always changing and that even seeming stability results from social reproduction processes rather than from nothing occurring at all. Every time a young child swaggers or minces in her mother's shoes, they are repeating gender differences, the relationship between gender and movement, and all of the ramifications of that relationship. But despite the fact that their behaviours may not yet be as well accepted into social practise, the little boy pulling his doll carriage and the girl dragging her vehicle are equally present in the scene. Life and everyday occurrences revolve around change about things transpiring, about intellect and creativity at work in the void left by the weak grasp of ideologies and institutions.

## CONCLUSION

The ramifications of accepting or resisting social norms related to femininities and masculinities are also examined in the chapter. While adopting traditional gender norms may provide people a feeling of community and acceptance, it may also promote negative stereotypes and injustices. On the other hand, defying these conventions may enable people to go beyond constricting expectations and promote more welcoming and inclusive societies. In addition, the chapter

explores how genders overlap with other social identities, including race, ethnicity, class, and disability. These intersections mould various gender experiences, emphasising how crucial it is to comprehend gender identities in a larger societal framework. Finally, the study of femininities and masculinities exposes the richness and variety of human identities by moving beyond the binary conception of gender. We may seek to eliminate constricting gender norms and advance a more inclusive and equitable society for everyone by critically analysing how society constructs these identities and their effects on people and communities.

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## CHAPTER 5

### Foundations and Social: Gender as a Classification System

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#### ABSTRACT:

As a system of categorization based on sex, gender is crucial in determining how human societies and personal identities are formed. This chapter explores the complex interactions between biological sex and the social norms and duties that are imposed on people, tracing the history of the idea of gender as a social construct. Fundamentally, gender serves as a framework for how cultures classify and distinguish people according to their biological sex. This binary division has historically been firmly ingrained in cultural institutions and conventions, affecting how individuals see themselves and others in respect to gender roles and expectations. The intricate link between biological sex and gender is explored in this chapter, emphasising the differences between the two ideas. Gender includes the cultural, social, and psychological traits connected to being masculine or feminine, while biological sex refers to the anatomical and physiological traits that distinguish persons as male or female. Additionally, this chapter examines how the gender categorization system affects numerous facets of life, such as employment, family, education, and interpersonal interactions. Gender-related societal expectations can result in gender inequities, restricting possibilities and supporting established power structures.

#### KEYWORDS:

Gender, Human, Social, System, Sex.

#### INTRODUCTION

According to the biological definition of sex, two kinds of gametes are created from two different types of gonads in two different types of individuals, resulting in the formation of a genetically distinct human. How does sex connect to gender, and where does sexuality fall into all of this? These queries are looked at in this chapter. It must be emphasised right away that there is a lot of diversity in how these phrases are employed. The discussion that follows makes an effort to make the concerns clear, explain widespread use, and provide a unified framework for thinking about gender and sexuality. A categorization system based on sex is known as gender. The chromosomes, genes, gonads, gametes, hormones, and anatomical structures of the two sexes were used to characterise and distinguish them, and we also looked at the developmental links between them. There is a widely held belief that when one of these characteristics is identified as male or female, it is reasonable to assume that the rest of the characteristics will likewise be concordantly male or female.

Because of this, the presence or lack of a penis at birth is often used to identify men or girls. Discordances may and do occur, of course, and we now have a better understanding of the nature and source of a large number of them. Although estimates of the prevalence of ambiguous

external genitalia are naturally problematic, it has been claimed that 0.1-0.2% of infants have considerable ambiguity and 1-2% have less severe ambiguity. Even if the ratio is minimal, there are a lot of intersex people as a result. Genital ambiguity has traditionally been treated in American and European cultures by intervening as early as possible to eliminate or decrease uncertainty and give the kid a clear anatomical and therefore social sex. It was deemed unacceptable to be in an intersex state. Other cultures, such as those in India and certain indigenous peoples in North America, have adopted a different stance and welcomed intersex people for who they are, often giving them a specific social standing as a separate third sex. Recent changes in American and European culture have resulted in a more flexible approach to the therapeutic care of genital ambiguity, in part due to demand from those who were given 'sex' medically, and in their opinion incorrectly, as infants[1], [2].

A bipolar allocation of many additional features as gender attributes parallels the bipolar biological categorization of people as either males or women. These characteristics differ from those of sex in that they are based more on attitudes, expectations, behaviour, and roles; some of them may seem contentious or less absolute; many are complex; and many change in detail or substance across cultures or over the course of historical time within a single culture. These characteristics have been placed under the general topic of gender in the table because they are related to sex, however not always, always, or simply. Additionally, any causal connections between the characteristics mentioned under sex and the characteristics listed under gender are not necessarily immediately apparent. For this reason, gender is described in this context as a sex-based categorization system. We reserve the terms male and female to describe sexual characteristics and the phrases masculine and feminine to describe gender traits in order to separate sex from gender. The substance is determined by how sex characteristics relate to gender characteristics. Since collectively they will affect social interactions and subsequently the socially based gender traits, it is important to investigate the underlying causes of gender disparities in conduct. Finally, we will discuss gender's reproductive and sexual characteristics and how they relate to sexuality.

A thorough knowledge of gender requires a comprehension of two quite difficult ideas. The collection of assumptions about what it means to be a man or woman in a specific culture is known as a gender stereotype. The elements of gender stereotypes are the gender characteristics stated in. A description that is widely recognised as describing what it is to be male or female in a culture is provided by gender stereotypes. The particular characteristics that characterise each gender will change throughout time or from one community to the next. However, sociological, historical, and anthropological research show a striking consistency in how often each of the aforementioned characteristics appears with more or less emphasis in gender stereotypes throughout a wide variety of countries.

For instance, conservative Islamic civilizations or ancient Judeo-Christian communities are more prone to the exclusion of women from public life or from certain social or professional occupations than are contemporary secular nations. Even while many of these links are considerably less now than they formerly were, gender stereotyping still exists in the later civilizations in that specific roles are still strongly linked with men or women. Men and women are expected to behave in different ways. Men's rowdy, violent conduct is resignedly anticipated and often forgiven, yet it is seen as unladylike when it occurs in women. On a more banal level, wearing trousers by women or men was very gender stereotypical in British society until

relatively recently. There were social rules about what was appropriate gendered body art and attire, many of which are still present in today's attitudes and values, albeit greatly attenuated.

Although it may seem challenging to describe the present gender stereotypes in terms that are acceptable to everybody in a society in transition, there tends to be a normative societal perspective regarding the characteristics that make up masculine and feminine behaviours. The homogeneity of such viewpoint may be particularly strong among peers, who make up each generation. No assertion is made when a gender stereotype is presented that it holds true for all or even for any female or male. Instead, it is a widespread cultural assumption about the nature of men and women. The societal agreement on what it means to be a man or a woman has a significant impact on how people see themselves and the others in their lives. It gives them a standard to compare their own and other people's masculinity and femininity to [3], [4].

This evaluation process is crucial because those who seem to deviate too much from the stereotype are often seen unfavorably or used as the target of rebellion. Although there are limits in both directions, in civilizations where gender has a significant social influence, it is less acceptable for males to seem feminine than for women to appear masculine. This disparity could be brought about by the fact that males are often more powerful than women, and as a consequence, their qualities are regarded more highly in society. Therefore, in communities where gender stereotypes are being challenged, it is more common for women's stereotypes to be viewed as being more masculine and for men's clichés to be more strongly resisted. The work options for traditionally masculine males are, however, restricted as economies move more and more towards a service role, where traditionally feminine traits are valued more. As a result, these men are marginalized since their masculine attributes are less appreciated. An important takeaway from this succinct talk is the gender characteristics have a major cultural influence.

## DISCUSSION

Gender stereotyping offers a social shortcut for sex-based categorization of individuals. A dizzying amount of social information is given to us. Learning to perceive the world around us is a necessary part of our development as youngsters. Sex differences have a significant role in that universe. Learning a gender stereotype or any stereotype, for that matter gives one a social shorthand or sketch that allows quick preliminary evaluations to be made of each person encountered. When we identify someone as male or female, we may link them to the many characteristics of gender stereotypes, which shapes our immediate action in ways that are suitable for both our and their gender. Obviously, this procedure will have a tendency to perpetuate societal gender stereotypes. However, it does not prohibit eventual responses to the person as a whole. If you have any doubts about the value of social sketching of this kind, think about how you respond when you are presented to someone whose gender and sex are not immediately apparent. How comfortable are you, and how does it influence how you act?

Or think about your reaction when you see gender norms that vary from those in your own culture, such as males holding hands or kissing in public or women being barred from public life. Because humans are social organisms, the norms that govern how societies run are crucial. The idea that I am a man or a woman is personal is referred to as gender identity. We hold the societal belief that there are two genders, each of which is extensively defined by our society's gender norms. Every one of us belongs to that society. As a result, every one of us perceives himself or herself as either masculine or feminine, and as either more or less fitting the stereotypical mould. The intensity and security of each person's gender identity are determined by how secure they

feel about where they fall on this bipolar gender spectrum. For the most part, people's gender identities are perfectly consistent with their sexes. Therefore, the majority of people who identify as women or males have strong gender identities. Although they still identify with their physical sex, some people may feel less convinced about their gender identities. These people are considered to have weak gender identities. Some people could feel completely at odds with their genetic, gonadal, hormonal, and genital sex, which is otherwise consistent, with how they identify as gender.

These individuals are referred to as transgender or transsexual. Trans gendering may happen in either way; those who are transgendered from male to female believe they are females with a female gender identity and brain but male bodies, whilst those who are transgendered from female to male believe they are men in a female body. Though this may reflect differential reporting more than actual frequency, male-to-female transgendered people have historically been recognised at a higher rate than female-to-male transgendered people. The gender roles of the physically different sex may be adopted by transgender people, and some may also get hormonal and surgical procedures to make their bodies and body functions more consistent with their gender identities. The greatest argument in favor of distinguishing between sex and gender comes from transgender men and women. The distinction between sex and gender may be more clearly defined if we have a clearer grasp of the foundations of trans persons[4], [5].

It's possible that gender disparities are not as significant as they initially seem. Intuitively, while considering gender traits, it is feasible to both reject gender stereotypes as being oversimplified and recognised them as being familiar. For instance, although men may not generally be comfortable sobbing or admitting their powerlessness, many individual men do express these feelings and exhibit these behaviours. Individual women may be just as aggressive and competitive as individual males, despite the fact that generally, women are linked with these traits considerably less often than men. Through the use of behavioural and cognitive function tests as well as questionnaires to gauge attitudes, several research have tried to quantify gender differences objectively and quantitatively. Most traits have such high levels of variation among populations of men and women that there is too much overlap between the sexes to result in discernible variations between the sexes. Furthermore, it is unusual for differences to have predictive validity; it is impossible to determine a person's gender based just on the measurement of a gender feature in that person.

Thus, a paradox exists. What it means to be a man or a woman in society is very well defined and polarized. Additionally, the majority of people claim to have a very distinct idea of whether they are male or female and are aware of the implications for their position in society. However, it is impossible to maintain a highly bipolar definition of a generalized society, both factually and subjectively. In terms of their expressed attitudes, patterned behaviours, talents, and increasingly, the positions they take on, men and women have a lot in common. A continuum of characteristics rather than a bipolar segregation exists. In spite of the absence of evidence supporting it, most cultures have a bipolar gendered organisation. Some societies reflect this fact and are comparatively genderless. Why? Such social structure is probably seen to provide benefits, such as the capacity to produce and raise offspring, manage inheritance patterns, divide work, and withstand external dangers. We'll move on to a discussion of how a gendered society may develop in order to further this conversation.



## Genesis of Gender

The explanation above should have made it apparent that gender is a notion that applies to people. Does this imply that research on the causes of sex differences in animal behaviour is useless to our efforts to understand gender differences in people? Before deciding if and how this evidence relates to humans, we first analyse this topic for non-primates, followed by non-human primates. The brain, hormones, and behavioural dimorphism. Animals' sex variations in behaviour and brain structure are conditioned by hormones. Animals exposed to sex hormones at a crucial stage of development are more likely to exhibit sexually dimorphic behaviours as adults, such as the unique urine patterns exhibited by the dog and bitch. This crucial time may occur late in the foetal or neonatal stages. The behaviours connected to copulation have received the greatest attention from researchers. Adult male rats exhibit courtship behaviour, mounting, intromission, and ejaculation during sexual engagement with females.

Adult females, on the other hand, adopt begging and receptive postures like lordosis. These actions are typically, but not always, associated with each sex. As a result, although females in heat often mount one another, regular males may sometimes request and even accept mounts from other males. The behavioural differences are quantitative rather than fundamental. When given testosterone during the first five days of life, female rats exhibit more masculine patterns of sexual conduct in maturity and less feminine ones. The opposite results are seen when male rats are castrated to reduce the impact of androgens during this same crucial time. Therefore, defeminization occurs concurrently with masculinization in rats. How do androgens affect the development of these behavioural variations?

Steroid exposure during the crucial time alters the structure of the developing brain, leading to many neuroanatomical abnormalities, some of which seem to explain behavioural differences between the sexes. The anterior hypothalamus and nearby medial preoptic area of the brain are two areas where anatomical sex differences have received the majority of attention. These two locations are well established to have a crucial role in regulating sexual behaviours in adult animals. Indeed, neonatal implantation of androgens into the anterior hypothalamus of female mice resulted in greater reproductive male behaviour in maturity in addition to masculinizing the surrounding brain structure [6], [7].

The development of sexually dimorphic genitalia and altered neuroanatomical and behavioural traits in animals are both clearly linked to hormones, according to the data. It's crucial to keep in mind that the observed behavioural differences between sexes are quantitative rather than qualitatively absolute. Therefore, it is oversimplistic to assume that certain sexually dimorphic regions of the brain are consistently linked to particular behavioural activities. There is still some behavioural adaptability. However, we can include sex variations in brain anatomy and behaviour into the same conceptual framework of sex as we did for gonads, hormones, and genitalia thanks to our extensive knowledge of these animal research. Therefore, in these species, there is no requirement for a gender category.

Non-human primates exhibit behavioural variations between the sexes that seem to be driven by hormone exposure during fetal development. How much of the same influence do androgens have on the emergence of sexually dimorphic behaviours in non-human primates? Rhesus monkey experiment findings point to some parallels. In their patterns of play as children, young girls who were exposed to high doses of androgens during fetal life exhibit levels of sexually dimorphic behaviour that are intermediate between normal males and females. Furthermore, although



newborn monkeys of both sexes may mount other monkeys, only males will eventually show mounts with a mature pattern. However, this mature mounting style does emerge in androgenized females. Additionally, compared to non-androgenized females, they seek to mount other females more often as adults. Thus, persistent 'masculinization' of conduct results from neonatal androgenization. However, as adults, the androgenized female monkeys have regular menstrual cycles and are capable of becoming pregnant. They must consequently exhibit adult feminine sexual behaviour patterns that are at least sufficient for them to engage with men effectively, indicating that they have not been completely or permanently defeminized.

These findings imply that androgens have a less significant or long-lasting impact on the development of sexually dimorphic behaviours in primates than in non-primates. How could this be? The timing of the crucial androgen-sensitive impact on brain formation offers one possible explanation. This happens neonatally in rats, when the genital phenotype has already been established, making it simple to manipulate. If there is a crucial phase in primates, it occurs during fetal life and might last a long time. If administered androgen levels are excessively high, attempts to androgenize primate fetuses in utero often end in abortion. Additionally, the genitalia are often masculinized, which may have an impact on the infant's future social interactions and cognitive development. As a result, it's possible that androgen hasn't yet had a distinct, selective impact on the brain. Alternately, it's plausible that non-human primates do not experience the same rigorous hormonal control of sexually dimorphic behaviours as non-primates do. Masculine behavioural traits may be predisposed to by androgens, but other variables may also affect how much they manifest[8], [9].

There are a few of these differences among non-primates, some of which are found in the parts of the hypothalamus that are most closely related to sexual and reproductive behaviour. Although it is likely that most of these neuroanatomical abnormalities are caused by early endocrine exposure, this has not yet been fully shown. Neither has a clear link been shown between sexually dimorphic brain architecture and conduct. Although there may be disparities in gender presentation and brain anatomy across sexes in humans, the root reasons remain unknown.

It should come as no surprise that when the human is taken into account, the challenge of researching non-human primates is made much more complex. The need to employ post-mortem brains limits the quantity and quality of the data available for neuroanatomical research, and findings are further confounded by differences in age, disease, experience, and structural artefacts. A few persistent sex variations in the anatomical organisation of the brain have been found, for instance in a tiny area of the anterior hypothalamus termed the 3rd interstitial nucleus, despite the fact that studies are few and sometimes contradictory. Less is known about the importance of these sex variations for gender identification and traits. It has been asserted that gender identity, rather than sex, explicitly correlates with the size and organisation of the central bed nucleus of the stria terminalis. As a result, it is said to be smaller in trans women as well as women overall. The number of individual brains analysed, the gender variations that were seen, and the overlap between the sexes prevent nuclear size from being a reliable indicator of gender. Furthermore, it is unclear when or why these size disparities start to exist.

It will be challenging to reach clear conclusions until we have more information about the moment at which brain variations occur and until we get the opportunity to examine more brains from a wider spectrum of people with gender or endocrine disorders. Neuroanatomical imaging methods have more recently been used to look for distinctions between males and females in the

functional structure of the live brain. Several of these studies have now shown significant sex differences in the lateralization of various brain activities, with females typically displaying more left-lateralized language and emotion processing and men typically displaying more right-lateralized visuospatial activity. Additionally, the amygdala, a part of the brain involved in emotional processing, exhibits sexual dimorphism. Overall, further research is required to reliably identify sex and gender-based variations in brain organisation. Certainly, assertions on the hormonal aetiology of any differences need to be taken with caution. For instance, amygdala dimorphism has been attributed to genetic variations[10]–[12].

What about the connection between hormones and genetically predetermined human behaviour? Through the use of numerous gendered traits, this subject has been researched in both adults and children. Reiterating that there are significant overlaps in gender traits between the two sexes in humans is crucial. Genetically affected females with adrenogenital syndrome, nature's equivalent of experimental animals given exogenous androgens during the crucial stage of brain differentiation, have been used to explore the impact of prenatal hormones on behaviour in the future.

It is crucial to be recognised that we are not dealing with 'pure' androgen effects in these young girls and women, since under- or overexposure to corticosteroids has been shown to directly impact brain development and conduct. Studies on girls with AGS have shown greater energy expenditure and physical interests that are more typical of males, as well as a lower occurrence of rehearsals of maternal behaviours and activities involving dolls, as well as decreased interest in clothing, jewels, and hairstyles. This range of behaviours, known as tomboyish, is well-known and acceptable in Western society and causes few, if any, issues for children that fall into this category.

Similar to the alterations in rough-and-tumble play in newborn monkeys exposed to androgens prenatally, tomboyish may be a result of the effects of androgens on the fetal brain. However, compared to a group of non-AGS tomboys, AGS girls had greater feminine gender identities overall, whereas control girls had just marginally weaker gender identities. Furthermore, there was no obvious correlation between the degree of genital virilization and weak feminine gender identification in AGS girls.

Further research on AGS girls in adulthood has only shown little evidence of persistent behavioural effects. The frequency of lesbianism and unhappiness with one's female gender identity is therefore somewhat greater in them than in controls, albeit this is not connected to the level of presumptive androgenization. Although not always the most androgen-sized, some AGS women do identify as trans guys. Overall, the research on AGS girls and women provide little evidence that androgens or masculinized genitalia are sole or essential factors in defeminization in people.

It is crucial to keep in mind that the AGS girls and women investigated would, by definition, fall within the low to moderate androgenization range, when genital virilization is still in its infancy. While these variations are minor, there are sex differences and probably even gender differences in human brain anatomy. Both their onset and their origin are unknown. There is no concrete evidence connecting them to specific behavioural variations between genders in a causal way. Animal evidence implies that hormones may affect brain structure, which in turn affects behaviour, but even in animals, there isn't a strict and unbending causal link between the two. A function for hormones prenatally or neonatally is feasible in humans, where there is even

more flexibility and overlap of gendered characteristics and sex-related behavioural patterns. However, additional study is required to determine the entire amount and nature of any effect.

### CONCLUSION

Beyond the binary paradigm, the chapter explores the flexibility and variety of gender identities. Individuals who identify as non-binary, genderqueer, or transgender contest the conventional categorization scheme and push for acceptance of a wider range of gender expressions. This examines how language and communication support or oppose the system of gender categorization. While inclusive language and initiatives to promote gender equality contribute to social development and cultural change, gendered language and stereotypes may reinforce established norms. In conclusion, gender continues to be a crucial component of human cultures as a system of sex-based categorization. Recognizing and combating gender-based discrimination and inequality requires an understanding of its social relevance and historical roots. A society where people are free to express their gender identity in an authentic and prejudice-free manner may be created by adopting a more inclusive and nuanced definition of gender.

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## CHAPTER 6

### **Nurturing Gender Development: Social Learning's Vital Role**

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#### **ABSTRACT:**

An interdisciplinary analysis of gender development as a component of human social learning. The process through which people acquire and internalize their gender identity and duties is known as gender development, and it has several facets. This chapter provides an interdisciplinary examination of social learning theories' contributions to our knowledge of how gender identity and gender roles are acquired within various cultural settings. Fundamentally, social learning processes that take place via observation, imitation, and reinforcement have an impact on gender development. According to social learning theories, people pick up gendered behaviours, attitudes, and expectations through seeing and imitating the activities of important people in their lives, such their parents, friends, and media depictions. The chapter looks at how family dynamics affect gender development since carers are crucial in helping children establish their gender identity by reinforcing gendered behaviours and providing toys and activities that are exclusive to one gender. Further elements of social learning that reinforce gender norms and expectations include peer interactions and the larger social environment. Because civilizations design and reinforce gender roles differently, cultural influences have a substantial effect on gender development. This chapter examines how cultural practises, customs, and media portrayals influence the formation of gender identities, highlighting the need of taking into account cultural context to comprehend gender development.

#### **KEYWORDS:**

Cultural, Development, Gender, Social, Social Learning.

#### **INTRODUCTION**

The alignment of social learning theory with cognitive and biological views on gender development. Cognitive theories investigate how kids actively receive and interpret gender-related information, while social learning emphasises the impact of contextual circumstances. From a biological standpoint, gender identity is examined in relation to how genetics, hormones, and brain anatomy interact. The current issues and discussions pertaining to gender development. The acceptance of non-binary and transgender identities questions established gender norms and the applicability of social learning theories to a range of gender experiences. Individuals internalize gender identity and responsibilities in their social environment via the complicated and multidimensional process of gender development. The impact of social learning on gender development is thoroughly examined in this review study. The study analyses how social learning theories assist to understanding gender identity development and the adoption of gender roles across various cultural settings, drawing on multidisciplinary [1], [2].

An overview of important social learning theories, such as Bandura's Social Learning Theory and the Social Cognitive Theory, comes first in the review. According to these beliefs, people learn via imitation, observation, and reinforcement, and gender development is impacted by exposure to gender-specific behaviours, attitudes, and expectations shown by important people in a person's life. This shows how family dynamics affect gender development, highlighting the importance of main socialization agents as carers. Through the reinforcement of gendered behaviours and the provision of gender-specific toys and activities, parents play a critical role in influencing their children's gender identities. The complexity of gender development within the setting of the family is increased by the social learning that is also facilitated by siblings and other family members.

This also looks at how peer relationships and a larger social context affect gender development. Through play, conversation, and social behaviours, peers serve as crucial socialising agents by reiterating gender norms and expectations. The larger social milieu, which includes media depictions and educational institutions, also has a big impact on how youngsters perceive gender roles and how gender stereotypes are perpetuated. Exploring the impact of cultural influences on gender development, this article demonstrates how civilizations design and reinforce gender roles differently. The formation of gender identities is influenced by cultural norms, traditions, and media portrayals, highlighting the need of taking cultural context into account while attempting to comprehend gender development. The use of the social learning theory to comprehend gender diversity. The conventional ideas of gender are challenged by non-binary and transgender identities, which calls into question the applicability of social learning theory to account for and explain various gender experiences.

The report next considers how the examined studies may be used to advance gender equality and lessen prejudice against women. Societies may conduct interventions to combat harmful gender norms, advance inclusion, and establish a more equal environment for all people by acknowledging the malleability of gender identity and roles. In conclusion, this review essay provides an in-depth analysis of gender development as a facet of social learning in humans. The study adds to a greater understanding of the complex processes by which people acquire and internalize gender identity and roles within their social environments by combining ideas from numerous disciplines. The results highlight the role of social learning in determining gender development and provide the groundwork for developing inclusive and egalitarian communities that value and celebrate a variety of gender identities[3], [4].

## DISCUSSION

The significance of classifying a newborn as a boy or a girl based on the existence or absence of a penis once again in the discussion above. It was noted that this task may then have an impact on how the person saw themselves as well as how their parents and peers perceived and treated the growing youngster. Now, as part of our research of gender development, we go further into this topic. Baby engagement patterns with their environment highlight gender disparities. Mothers attach various traits to male and female newborns from the moment of birth. As a result, when different people are given the same newborn and are given different information about whether it is a boy or a girl, their play, handling, and conversation with the baby will vary depending on how they perceive the sex of the baby. This kind of research demonstrates that newborns of various sexes are likely to be treated differently only by virtue of their sex. An extra point is made by a second illustration. Adults' judgements of a kid's actions depend on whether they



think the youngster to be a boy or a girl when they are given the identical video sequence of the child playing. For instance, when a startled youngster was thought to be a male, it was more often interpreted as being furious, but the same shocked action, when thought to be a girl, was interpreted as scared anguish. This kind of research shows us that adults may view the same action extremely differently depending on their assumptions of how a male or female newborn should act. It suggests that because of other people's expectations, certain behaviours could be rewarded or met with distinct gender-specific responses. Adults' expectations of boys and girls vary significantly, as shown by several studies, and males are considerably more likely than women to fall victim to gender stereotypes in this area. Girls are therefore treated more tenderly and are thought to be softer and more delicate. Parents spend more time engaging in these habits with girls since they are also expected to be more outspoken and socially involved. Boys, on the other hand, are more often reprimanded or treated brutally than girls. They are also urged to accomplish things[5], [6].

### **These kinds of discoveries highlight how crucial**

and how gender norms are applied subtly to kids from the time they're born. In fact, parents seem rather eager to promote gender differences in their children via the toys they give them, the clothing they give them, and the activities they support and discourage. When kids follow parental gender preconceptions, they get praise and rewards. The first two to three years of a child's existence are notably characterised by these parental gendering actions. A child's sense of gender identity develops specifically at this time. By the age of two, toddlers consistently identify as male or female. Shortly after, they reliably link certain behaviours and activities with men and girls. Both a gender identity and a gender stereotype seem to be present in them. Additionally, at the age of 5, kids seem to understand that gender is fixed and cannot be altered over time or in different contexts: they exhibit a sense of gender constancy. In fact, when 3–6-year-old children are given a video of another kid, their descriptions of that child's actions alter significantly depending on whether they are informed the child is a male or a girl.

When conducting the identical exercise, they actually seem to be even more strict in their gender stereotyping than their parents were! Children spend a lot of time together, which increases the likelihood that they will perpetuate gender stereotypes in one another via peer pressure. Of course, children are cognitive creatures. Although it does happen, they do not just absorb subconscious perceptions of the environment. They observe and hear what is happening in their neighborhood, in the media, and at school. They observe what men and women do and don't do. All around them, there are examples of how men and women should behave. Therefore, there could also be a copying component in how their gender identities are evolving and how they show it. Imitating is most likely a secondary process that has more to do with gender identity expression than its establishment since imitating a model presupposes affiliation with that model in the first place.

Therefore, there is a tonne of data to support the idea that gender stereotypes are transferred to infants and young children very early in life and that kids utilise them and apply them to their environment at a young age. Thus, gender stereotypes permeate the child's surroundings. Does this imply that a baby's gender is determined by how they are treated and the gender roles they are assigned? It is perfectly conceivable to propose that at least some of the gendered behavioural patterns that emerge in boys and girls may be differentially influenced by how they are treated by others and as a consequence of social expectations. In essence, a society's gender



stereotype may be taught to its offspring by the manner that they are treated. If this were the case, it may be hypothesized that parents' uncertainty over their kid's sex might have an impact on how the youngster develops their gender identity. Cases of trans gendering may be related to a sexually ambiguous upbringing, such as when parents treat their son more like a girl by dressing him in dresses and not encouraging 'boyish' play and athletic pursuits.

The evidence supporting this assertion is not conclusive. A claim is not always true just because it seems implausible[7], [8].

Baby gendered behaviours may influence how they are handled. The evidence that prenatal or postnatal exposure to androgens may affect gendered conduct was examined in a previous section. The data was in favor of a potential impact on children's play routines.

There are assertions that newborn male and female newborns exhibit intrinsically different behaviours, but they are not yet persuasive enough.

The idea that sex variations in infant behaviours can cause distinct reactions in adults seems at least feasible, just as babies might react differently to adults who behave in a gender-specific way towards them. Clearly, this explanation cannot account for the experiments mentioned above in which individuals were 'told' a kid's sex and behaved in ways characteristic of the gender they imagined the infant to be. However, there were differences in these trials when a male newborn was handled by adults, half of whom believed it to be a male and the other half believed it to be a girl, and they were then questioned about their experiences.

The adults had therefore felt more comfortable than when there was tension between fact and belief. This might imply that they saw discrepancies in the baby's behaviours that went against what was expected.

This may indicate that people are perceptive about whether a newborn is acting in a boyish or girlish manner. Of course, it doesn't tell us whether these observed behavioural variations were brought on by the baby's hormones or its prior socialization.

The crux of our problem is right here. How can we clearly distinguish the impacts of hormones from those of learning when boys and girls are likely to get different treatment from the time of birth?

To do this, one strategy may be to observe infants who 'turned' female's postpartum despite being born guys. Monozygotic male twins the so-called Money twins, named for the doctor who documented the case provided one very significant example in the 1960s. One twin had genetic problems at conception. This boy was reared as a female after having genital plastic surgery, hormone treatment, and gender reassignment. John Money saw Joan's description of having a female gender identity as conclusive proof that sex of raising trumped genetic, endocrine, and gonadal sex in the determination of gender identity. It was subsequently discovered, however, that Joan abandoned her feminine identity as an adult, changed back to John, got married, and had an adopted kid. Amazingly, until the late 1990s, this one instance dictated paediatric practise regarding genital ambiguity.

More organized prospective research on the emergence of gender identity in a variety of patients with various sex histories genetic, gonadal, genital, and rearing have recently started to appear. These are based on in-depth explanations of each sex-variable in connection to the gender

identity measurement result. Conclusions are at best quite tentative, although many XY individuals exposed to typical prenatal androgens but raised as girls are likely to come out as men later in life. People who are raised as boys and are exposed to high levels of prenatal androgens are more likely to establish masculine identities. If attempts are made to assign sex at birth or shortly after, such evidence is crucial. The alternative, as previously discussed, is, of course, to embrace the intersex state as a legitimate interim and long-term option a situation that, in order to be acceptable to many parents, would need both societal and legal approval [9], [10].

These results show that gender identity formation is undoubtedly complicated and that both foetal androgens and the gender of parenting certainly play roles, maybe interacting in ways that we do not yet fully understand. The male transgendered are particularly interesting in this perspective. We need to know whether their exposure to androgens was typical and if they were clearly raised as males in line with their genital sex. But why do they acquire a feminine gender identity? The development of transgender people may provide intriguing and significant insight on the relative contributions of hormones and environment to gender.

### CONCLUSION

The possible ramifications of seeing gender development as a facet of social learning are also explored in this chapter. Societies may work towards more inclusive and gender-equitable settings, fostering individual liberty and preventing the spread of negative gender stereotypes, by acknowledging the malleability of gender identity and roles. In conclusion, social learning processes are closely related to gender development because people internalize gender identity and roles via cultural reinforcement, imitation, and observation. To address gender diversity and advance gender equality in various cultures, it is essential to have a better understanding of the interactions between social learning theories, cognitive processes, and cultural influences.

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## CHAPTER 7

### A Comprehensive Overview: Gender and Sexuality

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#### ABSTRACT:

Gender and sexuality are fundamental components of the human identity and have profound effects on society, culture, and people as a whole. This chapter offers a thorough introduction of the fundamental ideas in gender and sexuality, examining their definitions, points of overlap, and the changing viewpoints on these difficult issues. The chapter starts out by describing gender as a complex concept that goes beyond the basic distinction between male and female. The roles, actions, and expectations that are ascribed to people based on their perceived identities and modes of expression are collectively referred to as gender. It highlights how gender is socially and culturally formed and maintained by society norms and practises. The chapter similarly clarifies the idea of sexuality, which is defined as a person's sexual orientation, wants, and attractions. It emphasizes the flexibility and complexity of human sexuality by recognising the variety of sexual orientations, including heterosexual, gay, bisexual, pansexual, and more. Additionally, the interactions between gender and sexuality are discussed in this review. Individual experiences are shaped by the interaction between different identities, illustrating how cultural expectations of gender roles may affect how one expresses their sexuality. Forging an atmosphere that is accepting and inclusive of people with various gender and sexual identities, it is essential to comprehend these intersections. The chapter also discusses the cultural and historical background of gender and sexuality. Societies have had varying viewpoints on gender and sexuality throughout history, creating a complex tapestry of ideas, customs, and degrees of acceptability in various cultures and historical times.

#### KEYWORDS:

Cultural, Development, Gender, Social, Sexuality.

#### INTRODUCTION

Four possible factors—sex chromosome makeup, hormones, social learning, and brain structure—have been taken into consideration in the determination of gender. The brain is important because neurological processes lead to the development of attitudes and behaviours, which serve as the foundation for social interactions. Genes, hormones, and learning all have an impact on the structure and operation of the brain. In non-primates, hormones have an influence on brain development and behaviour. In primates, however, their sex-dependent behavioural modulation is less pronounced. Learning and rehearsal are linked to modifications in the brain's hard wiring because of the patterns of neural circuit activity that result from interactions with the environment, including social learning. Endocrine and social elements have not been clearly separated when we look at the development of gender. One may argue that such a strict division is likewise impossible since one could interact with and support the other. Androgens may cause subtle gender differences in a newborn baby's behaviour. Parents and peers who have specific

expectations and ideas based on gender norms that shape their attitude towards the baby's behaviours and physique may notice these slight variances. Small differences often become greater as a result of these interactions. The infant or toddler soon becomes actively involved in the procedure. Based on the undeniable cognitive flexibility of humans, the process is dynamic, vulnerable to cultural diversity and change, responsive to change, and ideally adapted to the evolution of a social animal[1], [2].

### **Reproduction and Gender**

It has been said that gender is a system for classifying people according to their sex. In animals, reproduction and genetics have a major role in sex. Male and female partners must be brought together throughout the reproduction process in order for their haploid gametes to fuse during fertilization. In mammals, the successful development of a new person requires one of each kind of gamete. Mammals undergo internal fertilization, which entails the coition process in which spermatozoa are deposited in the vagina. Males and females may engage in elaborate rituals and activities during courtship and coition that display sex- or gender-specific behavioural tendencies. In general, females tend to be nurturing, emotional, consensual, creative, and private, while men tend to be more aggressive, competitive, and strong. These traits appear well matched to the explicitly reproductive gender roles.

Therefore, men are basically disposable. Females have a longer essential function in reproduction, but men have a short-lived essential role. Females are thus a valuable resource and need to be protected in dangerous situations if the social group is to survive. In theory, a single guy might provide all the sperm required for several females. Additionally, if food is scarce, all those extra men will be a waste of resources since they are biologically expensive. Therefore, they are useless in battle or in dangerous rivalry with one another. Thus, it is tempting to explain all gender disparities in human cultures in terms of how important they are to reproduction. It is also tempting to draw the conclusion that since gender differences in humans and sex differences in animals share many reproductive functions, these differences must be the result of an evolutionary process that is, at its core, genetically programmed and, therefore, ultimately genetic determined. It is best to reject these temptations.

### **The genetic heritage of humanity is undeniable.**

has a significant impact on us and how we behave. However, the significant extra legacy that our culture has left for us is what sets humans apart from the majority of other species. Humans differ from most other creatures in that we can utilise the information around us, learn as we develop, conceptualize, and construct and transmit civilizations, including sophisticated languages. This mental flexibility may be constrained by our genetic heritage, but it also takes use of the options that heritage presents. The influence of cultural inheritance is evident even from a cursory examination of the very diverse cultural roles that men and women play in various civilizations, as well as how they are regarded, esteemed, and act. Given what we saw about how youngsters pick up gender norms from the world around them, this is not unexpected.

Reproduction and sex are therefore intimately, inextricably, and irrevocably linked by our biological and genetic heritage, but reproduction and gender are connected by our cultural heritage in a less rigid and elastic way. When we look at the many functions connected to human courtship and competition, this idea becomes more obvious. Obviously, one such role is reproduction. The fact that humans can and do mate regardless of their fertility shows that

sensual pleasure is something that is very independent and separable from reproduction. The act of mating is a thing in and of itself. Courtship and competition may also have a broader emotional function, one that involves emotions like security, dependability, power, and self-worth. Additionally, courtship and coition serve social and economic purposes by establishing patterns of power and inheritance in a community when they are formalized in kinships. We should also keep in mind that reproduction has the unwelcome side effect of spreading certain microbes and the illnesses they may cause across a community, which is necessary for them. Because courting and coition have such a broad range of uses and effects, society makes an effort to regulate these behaviours via laws and norms. Then, of course, they are a part of the cultural heritage that we absorb as a result of our society's gender stereotypes. Many chapters later in this book will return to the topic of the connection between sex, gender, and reproduction that was addressed in this part. Now, however, we will wrap up our first discussion of sex, reproduction, and gender by examining how each of these factors relates to sexuality.

### DISCUSSION

The erotic is a part of sexuality. Courtship and coition may entail powerful and joyful sexual thoughts and sensations, as was discussed in the preceding section. The term erotic is used to characterise this intense sexual arousal in humans. In this book, we only refer to this erotic sensation and its expression in human lives as sexuality. There isn't universal agreement on this definition, and some people may think it's excessively restricted and contentious. Sometimes, sexuality is said to be a kind of all-pervasive condition that is difficult to discern clearly from gender itself, including everything that it means to be a man or a woman. This definition is too vague in our opinion to be of any value. Of fact, sexual behaviour and the associations that go along with it may be highly pervasive and are not, as we will see, restricted to activities related to courting and coupling. But at its core, sexuality is about internal erotic desire and imagination and how it manifests itself in sexually sensual action. An asexual person lacks erotic experience and imagination, while a sexual person is one who is erotically functioning intellectually and/or behaviorally.

Men and women seem to experience romantic arousal in ways that are biologically comparable, and neither gender is specifically mentioned in descriptions of what it feels like to be in this condition. What then makes erotic encounters distinctive for various people and genders? By analysing the erotic arousal stimuli, sexuality may be categorized. The goal of sexual arousal serves as the foundation of a widely used classification system for sexuality. Illustrations of this categorization. Regarding the information in this table, four things stand out. To start, there are many different stimuli that are erotically stimulating. It is important to remember that they do not necessarily conflict with one another. For instance, a person could be aroused by both men and women, by the opposing sex and by items or cross-dressing, or they might be sadomasochistic with the same partner or one of the other sexes. Human sexuality is complicated. Additionally, an individual's sexual arousal triggers may alter with age, experience, or societal expectations. This labelling method is thus insufficiently rigorous, and it may be deceptive to use labels as a shortcut.

Second, a variety of things, people, and activities make up the stimulus, some of which are characterised in terms of their eroticism while others are not. There are two degrees of description when it comes to sexuality. In contrast to the conceptual inner state of gender identity we previously outlined, there is the inner world of conscious arousal, imagination, and fantasy,



which is often referred to as sexual identity. It is a person's admission of their own condition as a sexual individual. Although most individuals choose to adopt the labels that society assigns to them, their real condition may or may not suit the categories. Thus, expressing one's sexual identity verbally can take the form of saying, I am a heterosexual/homosexual/bisexual being. Sexual attitudes and behaviours may or may not be a way for this inner world to be reflected. Society often has definite expectations for how individuals of various sexual orientations would behave and what their characteristics will be, and this will be absorbed as a component of an individual's sexual identity.

Third, because procreation is either impossible or improbable in the setting of being aroused by most of the stimuli, it is obvious that they have nothing to do with procreative sex. In contrast to other species in which reproduction and sexual arousal are extremely tightly co-regulated, this highlights the distinct separation of reproductive and erotic behaviours that may be seen in humans. In this respect, chimpanzees and bonobos, in particular, are the closest evolutionary cousins of humans among the higher primates. These animals therefore demonstrate rather clearly that sexual encounters may serve a social purpose in addition to a sexual one, both within and between sexes as well as across age ranges. Individuals of the same sex often engage in genital displaying and staring, caressing and rubbing, erection and mounting, which are seen as enjoyable and comforting. Although it is uncertain how accurate this difference is, these same-sex encounters are sometimes referred to be socio-sexual in order to set them apart from eroto-sexual interactions between men and females. The first important thing to realise is that, in sociable animals, sexual excitement may contribute to social bonding. Fourth, depending on the stimuli, the sort of person receiving them, and the culture in which they are encountered, certain sexual stimuli may or may not be socially acceptable.

As a result, homosexual actions between males have been variably seen as necessary, desirable, acceptable, immoral, unlawful, and pathological in different cultures and at different eras, whilst those between women have been disregarded, made fun of, politicized, and generally disregarded. Embraced, boosted, and praised. Similar to this, pedophilia has been and continues to be characterised differently depending on the broad variation in sexual consent ages in many societies, both historical and modern. Although heterosexuality is a societal norm in the majority of civilizations, it is severely constrained by barriers to expression in many, such as marriage, caste or ethnic group, or by the relative ages of the partners. Whether via legal or societal sanctions, sexual expression is often strictly regulated in society. It is often so rigid that people will conceal or deny any sexual sensations that do not fit with accepted sexual norms, or they may only express them subtly. It is highly challenging to do sexuality research because of the severe societal and self-censorship. In retrospective investigations using questionnaires or interviews, people may lie, distort, or recall just some things. As we shall see in the next two parts, which discuss how we develop sexual identities, behaviours and attitudes observed and documented may even in prospective research reveal a considerable influence of societal expectations[3], [4].

Social learning, androgens, genetics, and brain structure have all been linked to the development of sexualities. It would seem very improbable that there is a direct genetic foundation for our sexual bonds given the enormous variety of erotic stimuli. It is difficult to understand why genes causing fetishistic transvestic would have been chosen by evolution. It would make more sense to assume that evolution may have chosen genes that promoted sexual arousal in general and by the opposite sex in particular, since this would likely promote the most efficient transfer of those



same genes to subsequent generations. Could the base of sexual arousal caused by humans as stimuli vary qualitatively from that caused by things or situations? On this topic, there is not much solid proof. The same may have occurred with our sexuality, just as there seems to have been significant liberation of our gender from our genes in humans, making social learning more important. Flexible and adaptable social and sexual systems that resulted from this freedom may have evolutionary benefits. Therefore, it appears plausible that social learning also plays a role in human sexuality, whether or not there are genetic or anatomical parallels or even causes for it. Similar to gender identity, it is difficult to separate the strands.

The development of our sexuality may have a hereditary component, according to twin and family studies, a result that has received significant news attention. The outcomes, however, are by no means conclusive. The majority of the research have been devoted to the issue of how male homosexuality is decided. Compared to same-sex dizygotic twins, monozygotic twins are said to have a greater concordance of homosexuality. This discovery does not, however, prove the existence of a gene for sexuality. In fact, despite certain family studies' findings that some homosexual males may be more likely to possess a specific set of genetic markers on the X chromosome, none of these findings have been supported by subsequent research. These genetic studies of intricate behavioural features must be interpreted with caution.

Therefore, since they have greater genetic similarities, people are more likely to share traits and experiences. This might make individuals more prone to react in ways that result in the formation of a certain sexuality. Imagine if we learn about our sexuality while we are quite young. The development of the neurological system and the social environment may have an impact on how it is learned. Imagine a gene or set of genes that slightly sped up the development of one area of the nervous system at the expense of another. This might alter one's learning style and, in turn, affect the likelihood that a specific sexuality would emerge. This fictitious instance is used to illustrate how, although there must be some genetic effect on sexuality, this does not necessarily imply that there is a genetic cause. It's conceivable that sexuality has more nuanced and multifaceted beginnings[5], [6].

Studies on the make-up of the brain serve as a second source of support. Examples of suggested sexual dimorphism in human brain organisation and structure were previously provided. According to some findings, the third interstitial nucleus of the anterior hypothalamus, which is bigger in males than in women, is of a middle size in the brains of men who openly identify as gay. In certain research, however, the overlap in the size values between homosexual men and non-gay men is too considerable to be meaningful due to the limited number of males included in the investigations. These widely reported accusations' veracity needs to be investigated in further detail. If they do show to be accurate, it is next necessary to determine the beginnings and period of development of the size discrepancies. The research does not support the claim that variations in hypothalamic nuclei size either cause or are caused by homosexuality at this time. It is not known if this region of the brain is directly related to anything as complicated as gay inclination and conduct based on experimental findings from animals. Since this hypothalamus region seems to be far more involved with the organisation of copulatory reflexes than with the expression of mate choice, animal studies actually imply that this is very improbable.

Is there any evidence connecting exposure to androgens to a desire for women because certain hypothalamus nuclei in animals change in size as a consequence of prenatal androgen exposure? The issues we ran with while thinking about androgens and gender development apply here as

well. Although there is a greater prevalence of attraction to other women among women with adrenocortical syndrome, majority of these women exhibit a heterosexual attraction to males. Many more females who show no signs of exposure to androgens are drawn to females. In contrast, there is no indication that lower androgen levels are seen in homosexual males compared to heterosexual men. The absence of androgens is thus unlikely to result in male homosexuality, even if a lack of androgens may indirectly predispose to it.

What role does social learning so play? Associative learning research on paraphilias and fetishisms has shown some evidence linking early childhood sexual arousal to adult arousal cues. From a young age, children do exhibit signs of arousal, such as phallic erection, and they seem to like phallic stimulation. The connection of eroticism with an emotionally charged event or item in adult life may result from the coincidence of arousal with that event or object in infancy. humans just do not understand how humans acquire eroticized to certain stimuli, and the data supporting this claim is far from conclusive. The next section expands on the issue of social learning and sexual development. Strong emphasis is placed on the connection between gender and heterosexuality in highly gendered countries where heterosexuality is the social norm and homosexuality is frowned upon. Therefore, being attracted to men and women is a crucial component of both being feminine and being masculine. Thus, a heterosexual identity is absorbed into a gender identity, resulting in a conceptual conflation of the two.

Traditional Judeo-Christian-Islamic civilizations' sexual stereotypical representations are a clear example of this combination. Since feminine women are seen as sexually passive, receptive, and submissive, masculine males are viewed as sexually dominating, active, incentive, and initiating. Distinction from these tropes is stigmatized examples are the stereotypes of the sexually aggressive, macho, and defeminized lesbian and the sexually docile, effeminate, and 'unmanned' homosexual. As we have previously shown, heterosexuality need not be 'pure' and may live inside a person with broader sexual interests including sadomasochism, paraphilias, and bisexuality. However, in practise, heterosexual people exhibit a considerably larger spectrum of atypical sexual behaviours. A lot of gay men and lesbians, particularly those who are sure of their sexual orientation, do not adhere to effeminate or butch stereotypes, despite the fact that some of them may have unstable gender identities as men or women and may in fact do so. Lesbians who identify as homosexual and feminine are numerous, as are gay males who do the same. Of course, a culture where sexual and gender stereotypes are combined and deviation from the norms is stigmatised is likely to result in homosexuals feeling insecure about their gender identity.

There seems to be minimal stigma associated with masculine men and feminine women exhibiting gay sentiments and behaviours in other communities where this conflation of gender and sexuality does not exist. The transgendered are once again instructive in this respect. Transgender people who are male to female or female to male may find either males or women or both sexually enticing. In this way, a male transgender person who identifies as female and finds males sexually appealing may be gay before to surgery and hormone therapy, and heterosexual thereafter. Even though sexuality and gender have been socially intertwined in Judeo-Christian and Islamic cultures, trans people emphasize the need of intellectually separating the two.

Studying the potential social learning of sexuality is further complicated by the confusion of sexuality and gender. According to a number of retrospective studies, homosexuals and lesbians

report more gender-ambiguous early experiences than self-described heterosexual men and women do. For instance, lesbians remembered being tomboyish, whereas gay men remembered playing with females and their toys. Retrospective studies, however, are vulnerable to the risks of selective recollection and denial, which, as we saw previously, is a risk in a sensitive topic like this. A greater prevalence of homosexuality is shown in these persons as adults than in control children, according to prospective studies of children who were referred to clinicians exactly because they were engaging in gender-atypical play patterns as youngsters. Given that these results are based on kids that are so markedly different from one another that they were sent to a gender clinic, it is challenging to know how to interpret them. Because society, parents, and even children correlate gender and sexual stereotypes, they are more likely to emerge concurrently because each has a foundational socially learnt component. The findings do not imply that they must emerge simultaneously or that having one identity automatically leads in having the other[7], [8].

In fact, we don't fully comprehend the complexity of sexual identity. Our methods for categorising sexuality are at best approximations and remain heavily influenced by the historical perception that any sexual variation from a strictly defined heterosexuality is unhealthy and socially unacceptable. This is not a good place to start when examining how sexuality manifests itself naturally. There is little question that genes, hormones, brain anatomy, and social learning all have an impact on how our sexualities evolve, but there is no proof that any one of these factors is responsible for each of us having a certain sexual identity. The fact that different societies create various systems of sexual stereotypes and that these are assimilated into each person's sexual identity through social learning suggests that social learning must play a significant role in the construction of sexuality. This role may be augmented by or interact with the various influences of genes and hormones to affect brain structure and function.

Perhaps it is not unexpected that humans and primates cannot readily adapt to the relatively straightforward laws guiding the emergence of sex differences in rodent behaviour. There is no straightforward analogy in monkeys or humans for the observation in animals that exposure to androgens during a crucial time of early life both modifies the development of the brain and impacts patterns of sex-dependent and sexual conduct in maturity.

In both of the latter species, sexually dimorphic childhood behaviour serves as behavioural evidence of the effects of foetal female brain exposure to androgens; however, affected individuals can exhibit what appear to be typical patterns of feminine gender identity and heterosexual behaviour as adults. Behavioural dimorphism, gender identity, and sexual identity seem to be significantly shaped by birth-place gender assignment and the following gender-specific patterns of social behaviour and interactions that result from gender and sexual norms[9], [10].

## CONCLUSION

The changing viewpoints on gender and sexuality, highlighting the current struggles against heteronormativity and the gender binary. Greater acceptance and acknowledgement of various gender and sexual identities have been made possible through activism and lobbying, which has aided in continuing social changes and raised the profile of marginalized groups. This discusses how gender and sexuality affect several facets of life, including work, education, healthcare, and legal rights. There are still many places in the globe where there is discrimination and prejudice based on sexual orientation and gender, making it necessary to keep working to advance social

justice and equality. This summary concludes by providing a thorough review of gender and sexuality and recognising them as essential elements of human identity. Societies may create a more accepting and compassionate atmosphere that fosters acceptance and respect for the many manifestations of human identity and love by recognising the fluidity, intersections, and changing viewpoints around gender and sexuality.

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## CHAPTER 8

### Gender: Unraveling the Multifaceted Concept and Its Significance

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#### ABSTRACT:

The idea of gender has generated a great deal of discussion in academia, culture, and society, and it has been changing through time. The multidimensional meaning of the word gender and its ramifications for our knowledge of personal identity and societal systems are critically examined in this chapter. This research seeks to provide a thorough review of the intricacy involved in the definition and perception of gender by digging into historical, ethnographic, and modern viewpoints. The introduction starts by examining the origins of the word gender and how it went from being used to refer to biological sex to a more inclusive, socially created concept of identity. The chapter examines how gender developed as a crucial category that impacts people's experiences, roles, and expectations in society via a consideration of significant historical periods, such as the rise of feminist movements. Additionally, this concept recognises how cultural expectations and conventions influence how people see gender. It explores how socialization, preconceptions, and the establishment of gender roles interact, highlighting that gender is not an intrinsic characteristic but rather the result of cultural conditioning. The chapter shows the variety of gender manifestations and identities across many countries by examining cross-cultural viewpoints on gender. The chapter also explores how gender intersects with other social categories including race, class, and sexuality in order to highlight how gender experience is intertwined with other facets of an individual's identity. Given the many elements of an individual's identity, intersectionality offers a nuanced understanding of how privilege and oppression are experienced differently by different people. This chapter also explores how language and terminology affect how we see gender. It acknowledges the significance of utilising inclusive and courteous language in modern conversation while critically analysing the limits of language in reflecting the diversity of gender identities and manifestations.

#### KEYWORDS:

Feminist, Gender, Masculinity, Sexuality, Strategy.

#### INTRODUCTION

In order to situate feminism as a sector within the larger gender/sexuality area, I first explore the concept gender in this chapter. Additionally, this debate presents several concepts that are still relevant to the subject as a whole and will be covered in more detail in the sections on sexuality and masculinity studies. I then analyse the first subfield, which is feminism. Feminism is examined both in detail and as a way to illustrate the analytical strategy used throughout the book. Some of the characteristics of the three subfields are preliminarily indicated in the study, as well as how I want to describe them. I take on an account of feminism in particular to show how I'll outline the key trends in the gender/sexuality sector.

### **Gender: The term's definition**

One of the two subfields that might perhaps fall under the general word gender is feminism. This makes a basic explanation of feminism required before we can study it. Typically, the term gender refers to the social process of classifying individuals and social behaviours based on sex identities. Making hierarchies between the divisions that are enacted as a result of the gendering process is common. One or more sex-based identity categories are favoured or devalued. In contemporary Western society, there are two genders. This may not always be the case in different eras, locations, or cultural contexts. In the contemporary West, the term gender often refers to two different and distinct groups of people as well as the separation of social practises into two domains. Even though men and women inhabit both places, there is a strong relationship between men with public life and between women and home life in modern Western countries. This is an example of the gendering of social practices [1], [2].

In Western culture, the term gender alludes to a binary divide of people and societal norms, to the point that this distinction is even seen as diametrically opposed. The expression the opposite sex is an example of this in action. The two groups are not only seen as separate and antagonistic, but they are also placed in a hierarchy, with one being often portrayed as good and the other as bad. A friend is a fantastic thing to have, but no one wants to be a sissy, according to Cranny-Francis et al. in this situation. Similar to this, negative feminine counterparts like spinster may be compared to positive male categories like bachelor. Such categorical differences strongly separate, yet they also point to relationships. The characteristics of one category exist in relation to its alleged opposite because gender in Western culture is binary. Being male or female is the opposite of being a man.

Although the explanation I've given up to this point shows the typical modern interpretations of gender in feminist and masculinity studies, these meanings have changed throughout time and are still up for discussion. It was limited until the 1960s to primarily to what is linguistically coded as masculine or feminine. While some commentators see gender primarily in terms of social interactions and the institutions that develop between groups, many authors today characterise gender rather narrowly in terms of social identities. Bob Connell's concept of gender relations illustrates the latter approach, which views gender as a structuring process rather than placing it in identities. It is clear from reports of what it depicts that many interpretations of the phrase exist. It has, for instance, been used in a variety of ways in recent years to refer to social constructions that are generally linked to the male/female distinction, the existence of social groups that are produced in hierarchical relationships to one another, and social practises that are enacted through repetition rather than ones that are derived from any natural distinction.

Although gender is often associated with how society interprets biological differences related to reproduction, other analysts disagree with the premise that gender is inextricably tied to conceptions of reproduction. Attitudes towards gender and social change also vary. Others believe that gender and gender categories are now at least a political starting point and even suggest that the premature abandoning of marginal group identities like women may result in political gridlock. Some authors propose eliminating gender and gender categories. Regardless of how gender is seen or interpreted by critics in the gender/sexuality area, in actuality, it relates to or encompasses two key subfields, namely Feminist and Masculinity Studies. While Masculinity Studies and Feminist Studies primarily focus on men and women, respectively, both are increasingly discussing both. Although these subfields often concentrate on only two sexes<sup>3</sup>,



they have increasingly started to accept more multiple sexed identities. Insofar as gender comprises several subfields, arguments over the word itself disclose a lot about conflicts within and among them and provide clues about the present state of the gender/sexuality field as a whole. Therefore, such discussions of the word provide a helpful starting point for introducing the larger topic and the discussion of the subfield, feminism, that follows.

The examination of sexed identities and practises, or the discussion of social connections inside and between groups designated as men and women, is now often referred to as gender. This dominance is relatively new; many feminists disagree with the transition from concentrating on specific identities, as in Women's Studies, to a concentration on Gender Studies on the grounds that doing so neatly diverts attention from women's subjugation. Such analysts contend that the gender terminology, which is meant to be more politically neutral, may really include the imposition of an agenda. The radical criticism of women's studies is attempted to be excised in this context, and prescriptive demands that women's studies be accompanied by an equal focus on men are related with gender. Other authors, however, contend that this distrust is unjustified. Some people point out that, despite the fact that it shouldn't, study of gender nevertheless often centres on women in this situation[3], [4].

## DISCUSSION

It appears that the term gender as the proper name for a combined field including Feminist and Masculinity agendas may be viewed as problematic on several fronts. While writers of Masculinity Studies are generally more accepting of the terminology, they too frequently seem concerned about the potential for retreating from a focus on power relations between men and women. Furthermore, some homosexual male authors are not sure that the large field of gender studies can fully handle their difficulties. In fact, a lot of authors who focus on sexuality regard the word as mandating such a separation rather than just identifying a specific socio-historical process of binary split into two sexed groups. Ironically, it seems that gender is contested on the basis that it is linked to both a lowering of the emphasis on specific sexed identities and a raising up of such identities. Others believe that gender's focus on sex-based identities is exactly the way to destroy these identities. This debate highlights an ongoing discussion about whether focusing on particular identity groups is politically beneficial or detrimental that is central to the entire field of gender/sexuality theory.

This discussion about the status of identity politics arises both in feminist and sexuality and masculinity studies. Along a Modernist-Postmodern continuum, the subject of identity politics also demonstrates very clearly the diversity of approaches and frames of reference in the area of gender and sexuality. In fact, one of the main justifications for my use of the continuum in mapping out field characteristics is the relevance of this topic and how it reflects the variety of thought in the area. Additionally, the word gender has come under fire for creating an uncomfortably clear division between social and natural/physical categories. Gender has been used to suggest that sex-based identities and behaviours are not always well-organized in human society. In other words, having a male physically does not automatically translate into social masculinity or a masculine mental identity. In this context, gender was considered as an example of social construction.

The phrase suggested a profound refutation of traditional beliefs that posited biological determinism. In other words, gender proposed a criticism of the many different viewpoints that presupposed that one's physical sex determined one's identity and that biological sex differences



account for social structures in humans. The word gender made it possible to challenge biological assumptions, such as the notion that male bodies are inherently more aggressive and female minds are less mathematical. However, a lot of evidence suggests that ideas about biology do evolve throughout time. For instance, Julia Epstein has emphasised that historically, hermaphrodites were thought to be the offspring of the devil. Because of this, some authors favour using the word sex as opposed to gender, sexuality, or sexual difference. Jackson further notes that the word gender has a distinctly English-speaking history. English-language authors who, for example, were inspired by French theorists like Foucault or Wittig may not be as fond of the phrase. Gender-based critical thinking on the subject did not become common until the 1970s, even in the English-speaking world [5], [6].

Gender is the most widely used word today throughout the sub-fields of feminist, sexuality, and masculinity studies. I have included it in this book not because I have any especially strong commitment to it, but rather because it is the most prevalent phrase today. This pragmatic use should not exclude acknowledging the many perspectives on the biological basis of the social ordering of sex identities that are revealed in discussions over the word gender, as well as the historical and cultural distinctiveness of theoretical names and traditions. The latter issue poses a significant new issue. Authors that use the word gender instead of sex or sexuality do so to demonstrate that the distinction between men and women is more complex than a straightforward manifestation of everlasting nature. People who disagree with its use, however, reject the biological-social separation it seems to suggest and, thus, refuse to draw distinctions between sex, sexuality, and gender.

In this study, the relationship between biological sex differences, sexuality, and gendered social structures is taken into account. Here, there is also discussion of the connections between the concepts of gender and sexuality. Commentators who completely deny gender provide one form of theorising that claims gendered structures and sexuality are intertwined, but they are not the only ones. The majority of authors in the field of Feminist and Masculinity Studies see gender as connected to sexuality. Many even assume that gender is the basis for sexual identities and behaviours. According to this perspective, gender emerges first and then influences sexuality. The majority of sexuality study's authors lack conviction. For instance, Gayle Rubin argues that sexuality and gender should be studied independently and is harshly critical of theories that reduce the former to the latter. Indeed, a very limited number of authors on feminism and masculinity as well as sexuality theorists in general are considerably more likely to claim that sexuality comes before gender.

As I said in the Introduction, these disagreements show that the three subfields' orientations vary from one another and show how difficult it is to define a subject of gender/sexuality theory. While Sexuality Studies concentrate on the structuring of desire and are becoming somewhat adversarial to gender approaches, Feminist and Masculinity Studies tend to align themselves together and emphasize the importance of gender. Looking at the word gender reveals that there are significant and continuing discussions about it, which also reveals information about other pertinent concepts. I have highlighted three of these discussions:

1. Whether or not we should emphasize specific groups or identities.
2. The issue of how social and biological things interact.
3. The debate over the relationship between gender and sexuality in particular and sex, and sexuality.

All three of the subfields of gender/sexuality theory—feminist, masculinity, and sexuality studies—discuss these issues in different iterations. I have brought them up to demonstrate how they map out the gender/sexuality field's thematic topography. They show how the discipline is distributed along the Modernist-Postmodern continuum, the nature of its subfields, the importance of individual authors and publications within it, as well as hinting at its simmering conflicts. They influence this book's format as a result. I'll now demonstrate how discussions about gender and its implications link to the area of feminism.

### **Defining Feminism**

The first of the three subfields under the general area of gender/sexuality is feminism. The brief summary of this area that follows gives me the chance to outline my overall plan for the book. Looking at feminism allows me to construct the framework I use to describe and distinguish between various tendencies and trajectories in the subfields of gender/sexuality. I will use feminism as the first particular instance to lay out in the manner I propose to examine G/S theory and classify its key directions, much like how I used the specific word gender to indicate something of the vast terrain of this topic.

I explore the G/S area in terms of five primary theoretical orientations throughout the book. These theoretical approaches are characterised in regard to certain frames of reference and arguments. To emphasize key directions, I particularly draw on the Modernism-Postmodernism continuum of viewpoints on a variety of disputes. The broad continuum and many points of view on particular arguments are interconnected. Views on controversies sometimes correspond to positions along the Modernist-Postmodern continuum as well as to weaker or stronger forms of Modernism and Postmodernism. In respect to the continuum, the disputes, and the five key directions on which I concentrate, each of the subfields of feminist, sexuality, and masculinity studies places a distinct emphasis; yet, it is possible to understand all three subfields more effectively by making use of this information [7], [8].

### **The use of feminism as a role model**

#### **Critical attitude**

Like the other two branches of G/S theory, feminism has a turbulent past. It begins with a criticism of the status quo, of the norm, and of what is assumed. This area, along with Sexuality and Masculinity Studies, functions from the perspective of skepticism rather than as a simple description or study of what is as given.<sup>8</sup> Such a type of thought begins with the issue of whether the world has to be this way? even doubting the veracity of what is stated to be true about the world. Feminism's critical attitude in this instance takes the shape of a criticism of sexism, or the presumption that men are superior and essential. Feminists believe social and political theory was, and for the most part still is, written by men, for men, and about men, as Bev Thiele puts it. On the grounds that this prejudice makes women invisible or peripheral to understandings of humanity and distorts understandings of men, feminism is a critical philosophy that rejects what it terms the male bias of mainstream Western thought. The mainstream's emphasis on males is criticised by feminist writers inasmuch as this focus' limitations are not acknowledged. They point out that speaking of males is seen as speaking of all men in Western philosophy. This erroneously universalized MAN, who is meant to stand in for all of us, is unable to recognise his unique gender or his being a man. This has led to the paradoxically sometimes deadly male slant of popular thinking, as some feminisms have noted. For instance, feminist authors like Dorothy

Broom contend that it is difficult to provide effective health care for men without paying close attention to the specifics of men's bodies. This origin clearly shows that feminist theory, as an example of G/S theorising, begins from a critical or questioning perspective in respect to social structures and places the relationship between sex and power in society at its core.

Feminism, then, is a critical posture that challenges the mainstream's ideas about center and peripheral. Similar conceptions of the norm in connection to sex and power are decent red by Sexuality and Masculinity Studies, which shares this characteristic. Feminism not only challenges the conventional ideas of what belongs in the middle and what belongs on the periphery, but it also changes the focus of the analysis by giving priority to the idea of the woman. Even though feminists contest the legitimacy of this sexed identity, this nevertheless happens. Feminists, in essence, concentrate on what is seen as marginal or peripheral.

The three G/S field subfields have started to diverge somewhat at this time. Masculinity Studies takes a critical attitude on sex and power but pays attention to males and masculinity, which have historically been at the centre of Western thought, rather than the excluded. In spite of the fact that this sector has grown more diverse-aware, white heterosexual males still make up the majority of its clients. Contrarily, the focus of sexuality studies is mostly on marginalized identities and behaviours, such as LGBTI and/or 'Queer' sexualities. However, a significant corpus of study in sexuality studies has increasingly focused on heterosexuality, or mainstream sexuality[9], [10]. Even if the subject matter is positioned differently in society throughout the three subfields, the feminist critique is still there. It is becoming increasingly usual and recognised in the G/S area to critique the mainstream with a focus on the mainstream, such as by doing critical analyses of masculinity by examining how males are positioned. In a similar vein, Whiteness is becoming a more explicit topic in critical analyses, decentering the mainstream in relation to 'race'/ethnicity. This shift towards revisiting what is called the core rather than the peripheral. However, the most common method used in the G/S area has been and continues to be the marginalization of dominant sex and power assumptions. Why? because it has been assumed that the marginalize d's exclusion is a blatant example of how power operates in connection to sex and sexual identities and practises.

Whether critics in the G/S area concentrate on the fringe or the mainstream, the objective behind all of these strategies is to question the conventional hierarchy of sex rather than merely be critical. In other words, the tendency to question the idea of a right, appropriate, natural norm in connection to gender and sexuality characterizes all of the subfields. This primary drive to question the established quo has sometimes given rise to unease, if not outright rejection, over the standing of certain texts. Feminist philosophers have criticised masculinity theorists for being too passive in their criticism. Similar issues have been brought up in regard to feminism by critics on sexuality. Such disagreements over adequacy and belonging point to a common belief that G/S theory and all of its subfields are dedicated to social change, or at the very least social instability. The subfields indicate a degree of social change resistance to the established sex and power hierarchies. I will now focus more particularly to the history and arguments around feminism as an example in order to demonstrate these critical, decentering, and change-oriented traits at action.

### **Content: guiding principles and frameworks of reference**

The spectrum of five primary theoretical axes that span the Modernist-Postmodern divide may be used to characterise the discipline of gender/sexuality theory. By describing the concrete shapes

that these primary directions take in feminism, we may contextualize and also clarify this broad map of the G/S field and the continuum of viewpoints within it. To set the stage for the more in-depth chapters that will follow, I will briefly review the major paths of feminism.

### CONCLUSION

The current controversy over gender recognition, which encompasses a variety of identities outside of the conventional binary framework of male and female. A more inclusive view of gender as a fluid and personal experience is necessary in light of the challenges posed by non-binary, genderqueer, and genderfluid identities. This summary summarizes a thorough knowledge of the word gender as a complex and changing idea. Instead of being in a strict binary framework, gender occurs along a spectrum that includes a vast variety of socially and culturally determined identities and manifestations. In order to promote inclusion, comprehend individual experiences, and advance a more equal and just society, it is essential to recognise the complexity of gender. This chapter serves as a starting point for continuing dialogues and a plea to accept the variety of human identity as we continue to investigate and question the meaning of gender.

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## CHAPTER 9

### Modernist Feminisms: Reclaiming Humanity and Empowerment

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#### ABSTRACT:

The language around women's rights and gender equality underwent a significant intellectual and cultural change when modernist feminisms first appeared in the late 19th and early 20th century. This chapter explores how the modernist movement and feminist ideals dynamically intertwine, examining how two opposing but related perspectives impacted and changed the idea of The Human. Traditional gender roles and cultural conventions underwent a dramatic reassessment throughout the modernist period, which challenged restrictive systems that had existed for a long time. By speaking out against patriarchal domination and promoting women's liberation, female authors, artists, and activists were instrumental in this shift.

This chapter explores the writings of important modernist feminists including Virginia Woolf, Gertrude Stein, and H.D. who created stories that aimed to broaden the depiction of women as complicated people with a variety of identities and goals. Diverse artistic and intellectual groups that pushed for women's independence from social norms were also included in modernist feminisms. For instance, feminist ideals had a significant impact on the Chapter Expressionist painting movement, enabling female artists to freely explore their subjectivity and feelings. In literature, modernist feminists simultaneously tried to question established narrative structures and experiment with fresh literary strategies that emphasized subjectivity and autonomy.

In light of modernist feminisms, this chapter explores the value of the human experience. It demonstrates how the fight for equality and the affirmation of women's rights became inextricably linked to wider debates about human identity, nature, and existence. The interconnectivity of all people was emphasized by modernist feminists, who also argued against the strict gender binary and promoted a more inclusive and varied interpretation of human experiences.

#### KEYWORDS:

Feminist, Gender, Masculinity, Sexuality, Strategy.

#### INTRODUCTION

Feminism's so-called first wave in the late eighteenth and early nineteenth centuries was distinguished by its criticism of liberalism, which at the time was the dominant school of Western thought. During this time, liberalism advocated a belief in the significance and freedom of the person, interpreted in terms of rights or claims to be free from governmental interference as far as feasible. Every person was to be 'free' to 'make their own path' and 'make their own money'. It was claimed that a person's humanity, what made them human, and their capacity for reason were what made them entitled to social and political rights. Due to their capacity for reasoning, people were independent of the state's paternal hand. People, as rational creatures, did

not need government support. Though it used words like humanity, individual, and reason that are gender-neutral, liberalism in the eighteenth and nineteenth centuries really depended on a hypothetical man and was only applicable to males.

First-wave feminism made notice of the fact that women were seen as illogical beings, were denied the right to vote, acquired property after getting married, and had little legal authority over their bodies and children. By pointing out that women were left out of this narrative, this kind of feminism advanced a criticism of liberalism's purported universality of its idea of a common human nature shared by everyone. First-wave activists, however, generally agreed with liberalism's notion of an international standard for social and political rights and selfhood. Instead, they pointed out that the norm was sexist and not universal. Early Liberal feminists advocated the extension of this standard to women in order to give women access to full adult citizenship within Liberal capitalist society, whereas some variants of first-wave feminism supported Marxist/Socialist critiques of liberalism's individualist standard and of Liberal capitalist society. Early liberal feminists advocated for include women in the liberal notion of humanity as a whole [1], [2].

By the 'second wave' of feminism, which emerged in the 1960s and 1970s, this global norm was under more forceful attack. A number of types or strands of feminism emerged, including radical feminism in addition to modified forms of liberal and Marxist/socialist feminism. There are several tales of these various forms of feminism that provide light on how they have been described. The fact that all of these feminisms, even first-wave feminism, had an emancipatory perspective is vital right now. They concentrated on a compensatory reversal that highlighted male prejudice and saved women's theorising and actions from obscurity. Most of the time, the goal was to liberate women from their historical oppression and marginalization, to include women in society, and to incorporate them into it in order to reform it. These second-wave writers often critiqued the Liberal universal norm more harshly than their eighteenth- and nineteenth-century contemporaries, but they did not completely give up on the idea. These second-wave philosophers are seen as continuing to give an Emancipatory or Modernist perspective in this manner. In order to clarify key facets of feminist thought that would later be pertinent to the discussion of Modernist themes in the Sexuality and Masculinity Studies subfields, it is first essential to establish certain characteristics of a Modernist frame of reference.

For a variety of reasons, second-wave feminists may be considered as belonging to a Modernist worldview. First of all, they all attempt to conceptualize a universal truth or method of analysis that may shed light on the fundamental workings of any civilization. This reality relates to 'oppression' and power. The goal of identifying the fundamental mechanism or reality of power is to dismantle the large-scale power structures that oppress women and other oppressed groups. Second, rather than being seen as power to, power in this paradigm is interpreted in terms of domination and repression. It has a downward, unfavorable effect that restricts or is strict. Major analytical concepts used by second-wave feminism, such as patriarchy and compulsory heterosexuality, point to the oppressive character of power. From the 1960s and 1970s to the present, second-wave feminism has advanced a theory about the nature of power, particularly the structural dominance of males as a group over women as a group. The dominating group is the owner of power as a quality or possession.

In essence, males are powerful. Thirdly, this idea strives to topple authority and mankind as a whole. A specific idea of the self is the fourth component of this emancipatory/modernist kind of



feminism. Second-wave feminists broadened and amended the mainstream Liberal universals of the individual, the human, and reason rather than adopting them. Women are included in an expanded explanation of the current Liberal universal standard of human nature, namely, reason, in liberal feminism. The majority of these many forms of emancipatory feminism focus on integrating women into an improved understanding of society and creating a shared political goal based on a single theoretical foundation. Their assimilationist philosophy focuses on reducing obstacles to women's full social engagement so they may join and be accepted in society on an equal footing with men. Emancipatory feminism contends that once authority is stripped away, women's actual liberated selves will have a chance to blossom. Because it exhibits certain characteristics connected with this word, emancipatory feminism whether of the first or second wave is referred to as modernist [3], [4].

1. This kind of feminism demonstrates a belief in metanarratives, which are broad, comprehensive explanations that give the idea of a single, overarching universal truth regarding society, power, and human nature or human-ness.
2. It sees power as a descending kind of dominance and as the possession of the dominant, which makes power expendable and empowers society.
3. It imagines the self as being imprisoned or oppressed by social power but possessing an inner core outside of power that may be freed or set free.

## DISCUSSION

In the field of masculinity and sexuality studies, there are analogous frameworks of modernist emancipatory or liberationist thought. Due to the continuous distinctions between the principal lines of inquiry in each of the subfields of the gender/sexuality field, we shall revisit the distinctions between Modernist and Postmodern frames of reference on a number of occasions. The first and second waves of liberal and Marxist feminisms shared the universalist and assimilationist approach I have described, which centres on a common Human Nature as well as a common political action agenda. However, Socialist and Radical feminists adopted this origination in a less direct manner. The latter strands sometimes supported generic ideas and universal notions of selfhood with the idea of specific group identities. The promotion of gender diversity grew. These explanations placed more emphasis on confirming women as a group and on how women differ from men than on allowing women to join, participate in, and integrate into a man's society on an equal footing. According to Elaine Showalter, feminist methods changed from being initially critical of the male-centered nature of the universal Human standard to being more celebratory of gyno-centrism or women-centered analyses that underlined gender diversity. As time went on, the preoccupation with conceptions of difference prompted a more thoroughgoing reassessment of basic Modernist paradigms and a turn towards Postmodernism.

### **Gender Difference: From 'Sexual Difference' Feminisms to Identity Politics**

The main trend in Western feminism by the late 1970s and early 1980s was a concentration on group differences, on theorising and politics arranged around a single identity or category, namely gender. Such a focus recognises gender differences as the point of departure for social analysis. Due to gender differences, women in this context have or identify with unique experiences that are separate from the general, purportedly universal assumptions about the world and what counts. Like Emancipatory feminists, Gender Difference feminists contend that 'universal' presumptions are really not neutral but rather come from males or ideas of the masculine and cast women as outsiders. The earlier thinkers, however, did not make an effort to

integrate or incorporate women in a gender-neutral universal Human norm where men and women are the same. Instead, they advocate for an alternative worldview that acknowledges and emphasises diversity, particularly in terms of gender. Writers with different gender perspectives include Mary Daly, Carol Gilligan, Nancy Chodorow, and Luce Irigaray. This condensed list makes it clear that gender differences are the only emphasis of both Modernist and Post-Modern methods. I refer to these frames of reference as identity politics and sexual difference, respectively.

Instead of attempting to situate the disadvantaged on the outside of the current society, the Gender Difference framework in Feminism sought to recognised difference in a constructive way. Such a worry entails revaluing the marginal in order to reverse the conventional hierarchy of social privilege. Indeed, at the very least strategically, the excluded are given priority in difference theorising. 'Revaluing the Feminine' has been referred to as this in feminist thought. Such thinking leads towards an at least divided explanation of various social and cultural positionings rather than an all-encompassing theory of social structure and human nature. This refers to asserting differentially constructed gender identities and experiences and establishing political platforms based on the unique placement of women in the Modernist Identity Politics variants of Gender Difference. Given the differences between women and men, this Identity Politics' women-centres emphasis is regarded as essential and as a remedy for the androcentric structure of contemporary society. Few feminists supporting this woman-centered Identity Politics make the claim that men and women are fundamentally different, but the analysis sometimes comes near[5], [6].

There is a notable rejection of any specific meaning to gender identities like women in the more postmodern inflected varieties of gender difference thinking, which are sometimes referred to as Sexual Difference thinking. Theorists of the Sexual Difference do not presuppose that women necessarily possess any unique traits that may be compared with those of males. Sexual diversity Feminists, on the other hand, revalue the feminine as symbolizing cultural difference from the norm. The Masculine is related with the norm what is seen to be universal as opposed to just special. Gender in this context refers more to the idealized symbolic register for power and hierarchy in society than to the real traits of men and women. It serves as a metaphor for the Western cultural emphasis that distinctions between individuals must be viewed as normal/superior or abnormal/inferior and not as variety, that differences must be seen as indicating an innately hierarchical order.

Sexual Difference theorists reimagine the Feminine as the means to envision multiplicity in society by revaluing it as having an independent potential and not only as the other half of the Masculine and by conceptualizing the Feminine as presenting a vision beyond hierarchy. While the definitions of the term's women/feminine and sexual difference are different according to the feminist identity politics and methods, they have certain similarities. The same issue of the incommensurability of the sexes and the need of embracing rather than stifling variance un social life are offered in Modernist and Postmodern variations.

In studies of sexuality and, to a lesser degree, masculinity, this Difference concept has analogues. Lesbian/gay studies, for instance, place a major emphasis on marginal group identities and the distinction between homo and heterosexual sexualities when it comes to sexuality theorising. In the Sexuality area, difference theorists also provide an anti-assimilationist political agenda that rejects the presumptions of mainstream heterosexual society and validates divergence from it.

The usual emphasis in Gender Difference on revaluing different identities or social positionings has necessarily taken a different path in Masculinity thinking from its application in Feminist and Sexuality theorising because commentators in the subfield of Masculinity Studies are committed to critical examination of dominant rather than marginal social identities. While authors of books on masculinity have sometimes used feminist Gender Difference models to emphasize the unique worldviews or positions of women, their objective has essentially forbidden any kind of Identity Politics based on manhood or masculinity. These authors categorically reject the notion that their critical methods support masculinity's difference, or domination.

Radical, socialist, and psychoanalytic feminisms are all included in the feminist movement's gender difference perspective. They all share certain distinctly Modernist universal elements with respect to the goal of creating a unique macro account structured on a unique understanding of difference that explains the reality of power. However, not all of them see power in terms of modernism as just oppression. Additionally, Gender Difference Feminism's description of the self or identity is not blatantly Modernist. In this perspective, identity is seen as more than a single thing and as not being the same everywhere. The disparity in groups identifies it. In general, feminist gender difference authors are clearly Modernist, although in certain cases it can be said that they are on the 'side' of Postmodernism that is closest to the 'border' of the Modernist/Postmodern 'split,' drawing on both paradigms while placed on that side. Particularly in the case of certain psychoanalytic feminist work is this boundary location clear.

One of the many feminist arguments against gender difference is presented by this theoretical framework. It may be found anywhere throughout the Modernist-Postmodern continuum. However, in more recent times, feminist texts that are concerned with race, ethnicity, and imperialism tend to congregate in the center, on both sides of the continuum's dividing line. For instance, they have played a small but often significant role in highly Modernist Emancipatory feminisms. The Marxist/Socialist tradition is where their presence is most noticeable. Additionally, feminists who address issues of race, ethnicity, and imperialism are often suspicious of strongly Postmodern viewpoints and, if they do so at all, prefer to embrace modified versions of Postmodern frameworks. They often maintain a more critical view of modernism and are typically less likely to reject identity categories as an important foundation for political thought.

Feminists who address issues of race, ethnicity, and imperialism may be heard in both the Social Constructionist and Group Difference camps, sometimes at the same time. These feminists may want to reinforce and revalue group differences and identities. They also challenge approaches to single group differences that solely highlight gender and sexual differences. The focus on a single gender difference, according to REI feminists, involves suppressing other differences and maintaining an essentialist account of men and women as one cohesive group without acknowledging that 'racial'/ethnic' or 'cultural' location might significantly alter any generalized assumptions about the relative power of these groups. In conclusion, it is probable that males who identify as Aboriginal in Australia would see their masculinity as an unduly limited and partial description of their social status. In this REI framework, categories of men and women cannot be seen as self-evident identities that are constant and have global social effects. This viewpoint overlaps or has connections to social constructionist critiques of gender differences[7], [8].

### **Feminist Social Constructionism and Relational Power**

Feminists who were social constructionist or materialist vehemently opposed the Gender Difference stance that gained prominence in the 1980s. According to social constructionists, difference is formed by power relations and does not belong to the self or identity. They maintain that focusing on gender or sexual differences is counterproductive and that marginalization, rather than making individuals different, is what causes differences. On similar reasons as those cited by the higher number of Difference feminists, these feminists may be identified as being on the Modernist side of the Modernist/Postmodern divide. Truth and power are described in general terms by social constructionist theories, and power is often seen as oppression. On the other hand, an ambiguous understanding of human essence disturbs this primarily Modernist viewpoint. The humanist focus on a pre-existing inner core to the person that characterizes Modernism is mainly rejected by Social Constructionist thinkers. Instead, they contend that the social structuring effects of power are what create and differentiate identities.

Both the Emancipatory and Gender Difference approaches emphasize relatively fixed ideas of identity, which Social Constructionism and Postmodernism both criticised. Inherent or permanent ideas about the human or group identities are criticised by social constructionism as promoting the idea that there is a fundamental underlying essence or core to the self. The same reasoning is used to condemn gay and lesbian difference methods within feminist and sexuality studies for creating excessively specific and romanticized narratives of the lesbian or the gay man. However, Social Constructionism continues to pay attention to identity categories because of its focus on socially and historically concrete research. This theoretical orientation does not require the rejection of such categories, in contrast to explicitly Postmodern views, but rather recognises the possible stability of such categories across time. The majority of Social Constructionism's inspiration comes from Modernist Marxist/Socialist and Radical feminists, however some of its authors are becoming more conscious of Postmodern theorising. It is covered in this succinct exposition of social constructionism.

### **Postmodern feminism: Fluidity/Instability**

The last category is postmodern feminism. Perhaps the most common feminist viewpoint throughout the 1990s and 2000s was this one. A multiplication of the idea of difference that arises in the group difference approaches is one of the things that postmodern feminism provides. The extension of difference in this theoretical trajectory is towards differences and a plurality that defies fixed identities. The goals of postmodern feminists do not include expanding the masculine world to include more chances for women or making the male world more inclusive. They also don't want to emphasize women or the feminine or turn the old order on its head. Instead, postmodern feminists want to undermine the entire notion of identity as well as the binary identities that underpin the first two approaches. Writers who challenge speaking for or as women, such as Butler and Sedgwick, underline our individual diversity. The concern with Differences that is typical of REI frameworks is here expanded to the point that the problem is not a movement beyond such categories of analysis that calls into question the existence of such categories in the first place.

Some authors who are engaged in REI may be referred to be postmodern philosophers and draw from their works. The phrase Postmodern Feminism, as I use it, refers to a strong kind of Postmodernism that rejects concepts of identity in ways that are incompatible with REI theorising. Similar to this, postmodern feminism is a particularly thoroughgoing kind of social

constructionism in this context. The goal of postmodern feminism is to declare that there is no truth underlying identification, in contrast to the Social Constructionist approach, which rejects too fixed or inherent concepts of identity in favor of a focus on the socio-historical construction of identities. Postmodern frameworks see people as nothing more or less than a social product managed by power, even if Social Constructionism has not abandoned a definition of social humanity or an explanation of human agency that interacts with social necessities. For instance, gender is a necessary disguise. This 'mask' has nothing in front of it or behind it. Strong anti-essentialism is a hallmark of postmodern feminism. There is no previous or real inner self underlying power in this feminist way of thinking. Power itself is not a single process, but instead produces several, fractured identities. Its activities are numerous, local, and productive.

This kind of view contrasts with Modernist ideas of power as an all-encompassing, oppressive force acting from above. In a nutshell, postmodern feminism is a profoundly anti-essentialist, anti-humanist, and anti-generalist attitude. Purposefully opted to capitalise Postmodern feminism to differentiate those authors who demonstrate an unambiguous Postmodern perspective and perceive this as the hallmark of their work, even when other feminist approaches may be seen as postmodern or seen as influenced by postmodern theorising. However, Masculinity Studies have not yet seen much of an influence from these decidedly Postmodern viewpoints, which are much more forcefully adopted in Sexuality Studies than in Feminism. In other works, what I have defined as postmodernism may be called poststructuralism. They are often used in the same sentence[9], [10].

It is crucial to emphasize at this point that this chapter merely provides a general overview of the differences between Modernist and Postmodern frames of reference within Feminism and Masculinity and Sexuality Studies. Later chapters, particularly those that discuss specific theorists, will further develop and contextualize it. As is typically the case with such wide and complicated phrases, examining how they are used specifically in particular publications may help to better understand the variety of meanings they might have. A comprehensive, in-depth examination of the diverse meanings of the labels Modernism and Postmodernism is therefore out of the question given that this book is about the area of gender/sexuality theory and its authors. The notes for this and subsequent chapters are filled with useful resources for readers who want to think about the words in further depth.

### **Putting the G/S field in context by examining feminism**

Now that we've described the five primary feminism-related paths, we can start to contextualize the previous schematic map of the whole gender/sexuality field. When we look at the example of feminism, the five primary paths that were described in connection to the larger field have distinctive manifestations. Similar structures may be found in the other two areas of Masculinity and Sexuality Studies, including these particular forms. The maps of the Modernist-Postmodern continuum in the G/S field generally and especially in Feminism will be repeated in different ways as I cover the two other subfields. As the arguments around this continuum are further developed via examination of the writing of many authors, they will become more and more obvious.

## **CONCLUSION**

This looks at the ways in which modernist feminisms impacted and moulded later feminist movements, having a long-lasting effect on the current struggle for gender equality and human

rights. Various ways in which modernist feminisms reinterpreted The Human and opened the way for more compassionate and inclusive societies via an interdisciplinary examination of literature, art, philosophy, and social activity. In conclusion, modernist feminisms were vital in questioning established social standards, promoting fresh perspectives, and altering how people saw themselves and their lives. This chapter focuses on how crucial it is to acknowledge the achievements of modernist feminists in influencing current conceptions of gender, human rights, and the continuing fight for equality in the twenty-first century.

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## CHAPTER 10

### Modernist Emancipatory Feminism: Liberal Feminism

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#### ABSTRACT:

In the continuous fight for women's rights and gender equality, liberal feminism developed throughout the modernist period as a key movement. This chapter explores the fundamental ideas and goals of liberal feminism, examining its relevance in questioning patriarchal expectations and promoting the freedom of women. This research attempts to provide a thorough analysis of liberal feminism's place within the larger landscape of modernist emancipatory feminisms by examining the historical backdrop, major actors, and its influence on society. The introduction of the chapter provides background information on the growth of liberal feminism in the late 19th and early 20th centuries. It explores the movement's relationship to the values of the Enlightenment, highlighting the importance of the liberal feminist movement's commitment to equality, individual liberty, and reason. The chapter looks at how liberal feminists worked to remove restrictions on women's ability to fully participate in public life, such as voting rights, educational opportunities, and economic independence. This summary also highlights significant individuals who contributed to the advancement of liberal feminist views. The importance of individuals like Mary Wollstonecraft, John Stuart Mill, and Betty Friedan in advancing women's rights and challenging ingrained gender conventions is explored. These influential individuals' arguments have had a long-lasting effect on feminist discourse and continue to influence modern feminist philosophy. Additionally, this chapter evaluates the successes and shortcomings of liberal feminism. The movement has been criticised for its limited emphasis on individual empowerment and inability to address larger structural injustices even though it has achieved tremendous progress in winning legal and political rights for women. The chapter looks at the current discussions among feminists over the effectiveness of liberal feminism as a force for attaining gender equity.

#### KEYWORDS:

Equality, Feminism, Gender, Liberal Feminism, Political.

#### INTRODUCTION

Beginning with the Modernist Emancipatory viewpoint, one of the major trajectories or orientations within Feminism, this chapter will focus on a specific kind or strand of Feminism in order to present an illustration of this theoretical tendency. A particularly helpful illustration of this Modernist viewpoint is liberal feminism. In the previous chapter, I defined five primary paths within the broad subject of gender and sexuality that span the Modernist-Postmodern continuum and gave a basic overview of these tendencies within Feminism. Modernist Emancipatory feminism was the first of these feminists thought trajectories. I also described a few characteristics of modernist methodologies. I asserted that modernist thought is concerned with human universals. The most significant concept is the idea of a universal Human nature. For this

reason, modernism is sometimes linked to Humanism, the idea that human beings fundamentally possess a core that distinguishes them from other creatures and nature.

Given its emphasis on what makes the universal Human unique, this is hardly unexpected. Modernism is obsessed with social structures and power dynamics that are common to all societies. According to modernist perspectives, society and power may be comprehended by a single, all-encompassing rule, law, or truth. This fundamental and macro-explanatory truth orientation in connection to people, society, and power is associated with top-down, unfavorable notions of power. It is also believed that the human self, upon whom power operates, has universal characteristics and is repressed, subjected, and/or oppressed by power. Thus, a real, fundamental self may be freed/emancipated from authority. It's feasible to disrupt electricity [1], [2].

I would include Modernist thinking's optimism over the potential for change in this list of characteristics. It presupposes that society and the individual will become freer with time. According to this method, history is linear and progressive. Over time, everything gets better. Strongly Postmodern thinking may be contrasted with such a viewpoint. Post-modernists are sceptical of any ideas of a founding explanatory core that is everlasting or permanent in human existence and are dubious of any universalizing, monolithic foundational explanation. They assert that neither the Human, society, power, the ego, nor history contain any fundamental truths.

### **The connection between feminism and modernist thought**

There are frameworks in feminism that span the whole spectrum from highly Modernist to firmly Postmodern, just as there are in masculinity and sexuality studies. Modernist or emancipatory thinking has a long history in feminist thought, there are several 'types' of this way of thinking within the feminist canon. Liberal and Marxist feminisms, which first emerged in the eighteenth and nineteenth centuries, are the most strongly Modernist types, though even these can be said to have a differential attachment to Modernism.<sup>1</sup> Feminisms that first emerged in the 'second wave' of the 1960s and 1970s are noticeably more ambiguous in this regard and offer a weaker Modernism. Since Liberal feminism is still a strong and pervasive type of feminist theory today, while avowedly Marxist variants are now much less common, I will initially focus on those feminist approaches that date back to before the 20th century. But I didn't simply make this decision because it fits with Liberal Feminism's long-standing, well-established viewpoint. In varying degrees, Marxist, Socialist, and Radical feminists all show a less steadfast allegiance to a Modernist frame of reference.

A little comment on the nature of this frame of reference may help to clarify their more ambiguous connection to modernism. Modernism in the West has often been associated with two primary lineages that are more or less dependent on its universalist humanism. These two traditions are the collectivist tradition, which can be connected to Rousseau, Hegel, Marx, Goldman, Kollontai, and Said, and the individualist tradition, which can be traced back to Hobbes, Locke, Kant, Mill, and Wollstonecraft. The latter has had the largest influence on socialist viewpoints and has most often had an antagonistic relationship to Western social systems, whilst the former formed liberal political thought and has generally been the dominant 'ideology' of Western capitalist societies. Marxist, Socialist, and Radical feminists are examples of generally Socialist-inflected ideologies whose oppositional posture has given rise to potentially more critical interpretations of mainstream Modernism. Such socialist-influenced

feminisms are more likely to challenge the uncritical assumption that one point of view may provide access to fundamental truth, since this may amount to nothing more than a defence of Liberal capitalist society's status quo[3], [4].

## DISCUSSION

Though these feminisms continue to be influenced by Modernism and its interest in human agency, the awareness of particular social distinctions like class, race, and gender tends to undermine ideas of the universal Human in Marxist, Socialist, and Radical feminists. As these discrepancies came to light more and more, opinions that questioned Modernism itself and any basis for the Human started to emerge. Because of this, Liberal Feminism seems to be the best-qualified, if not the only, example of Modernist viewpoints in Feminism. In this chapter, I will offer a general overview of liberal feminism and briefly explore the author Naomi Wolf in order to present the strongest argument possible for modernist feminism. In the next chapter, I will concentrate more intently on the writings of Martha Nussbaum.

### **Liberal feminism and liberalism**

As a reaction to the evolution of liberalism, liberal feminism. It is vital to provide a brief history of liberal ideas for this reason. Whatever its variations, mainstream liberalism established a school of thought in the late eighteenth and early nineteenth centuries that claimed that the individual is a descendant of the Enlightenment concept of an autonomous rational being and that political equality is connected to one's capacity for reason. The word Enlightenment refers to a body of concepts that developed in the West throughout the seventeenth and eighteenth century. According to Enlightenment philosophy, everyone who can reason is capable of autonomous thought and action and should thus be allowed to participate in society. Such beliefs attacked religious explanation and the divine right of monarchs in favour of secular rationality. In reality, however, these assertions were disregarded as having less validity since all women and some males were excluded. Since the advent of the Enlightenment, mainstream liberalism has dominated Western countries and heavily draws on these two strands of intellectual tradition. As a result, some groups of people are granted full citizenship in Western Liberal societies while others are not.

Liberal feminism made the point that these liberal, purportedly universal standards of humanity, equality, and reason were not in fact universal because women were denied full participation in social life, public life, and education. The seeming contradiction between liberalism's call for equality and liberty for everyone and its strict discrimination towards certain groups should be interpreted in light of the specific connotations attached to these concepts. Humans with the capacity for reason are the subjects of equality and liberty. Only they are eligible to get the status of being a member of the universal human. Only they are to be given the status of independent people who are qualified to receive public rights and freedoms. The 'uncivilized' or those who are more in touch with nature and hence more like animals are seen to be beyond the realm of reason and are thus not fully human and are therefore not eligible for these rights and freedoms. Instead of being able to be free in the private sphere of the family and in public legal terms, they are to be controlled.

From the late eighteenth century to the present, liberal feminism has emphasised that women have not been allowed to fully participate in society and public life. According to liberal feminism, the Enlightenment's and Liberalism's universalist ideals, which sought to overthrow

the rigid social order of mediaeval custom and elevate social position, did not go as far as to include women. Women make about half of the population in Western cultures, therefore by excluding them, mainstream liberalism is exposed to be less about fairness and more of a specifically Western male political goal. Liberal feminists contend that mainstream Liberalism is a defective offspring while they continue to preserve what they see as the critical spirit linked with the Enlightenment reason. The all-encompassing claims of liberalism are based on the assumption that only Western males count and that equality for men in the West equates to equality for all people who are fully human[5], [6].

### **A large movement known as liberal feminism**

Liberal feminists, like Mary Wollstonecraft, pushed for the inclusion of women in these male endeavours in the late eighteenth and early nineteenth century. Women's access to education, the Liberal paradigm of knowledge and reason, and participation in public life were among Wollstonecraft's goals. She wanted women to have the same opportunities and access to public events as males in her class did. Wollstonecraft, like other liberal feminists of the eighteenth, nineteenth, and early twentieth centuries, drew on the liberal tradition's value of equality and individual freedom to make the case that, just as liberals argued that social status at birth was no longer a justification for discriminating against men, so too was sex at birth no longer a justification for discriminating against women. In other words, she supported women's straightforward inclusion/assimilation into mainstream liberalism's protocols rather than challenging the paradigm of a universal humanity founded in reason or the universal idea of the individual inside it. By the second wave of feminism in the 1960s and 1970s, the majority of women in Western nations had won important social and political rights, including the right to vote.

A new kind of Liberal feminism emerged as a result of the new women's movement. This new Liberal feminism was epitomized by activists like Gloria Steinem and Betty Friedan in the United States, and Beatrice Faust in Australia. They played a significant role in the development of new, reform-focused women's groups like NOW in the USA and WEL in Australia. They said that despite the majority of women having formal rights, they were still restricted to the home and faced significant barriers to participation in public life and its chances, unlike males. The public spheres of business, politics, and the professions are still gendered. According to a 1993 ILO assessment, if present trends continue, it will take nearly 1,000 years for women to gain the same economic and political clout as men. In a similar vein, second-wave Liberal feminism argued that males were still more likely to be assessed individually than women, and that this contributed to the persistent marginalization of women. This meant that women were still subject to sex-based discrimination rather than discrimination based on merit. This point of view led to the development of first-wave justifications for women's participation in the traditionally masculine realm of public life, such as those made by Wollstonecraft.

Since its inception, liberal feminism has emphasised the abolition of barriers that women face and the achievement of equal civil rights for them as members of society. This emphasis is still a significant part of the public face of feminism today. It is essential to public efforts that try to make workplaces more family friendly, or maybe more appropriately more parent, relationship, and community friendly, such as those that address daycare, maternity leave, and flexibility in paid working hours. Childcare programmes, for example, are intended to help women balance their growing obligations for household and childcare duties with paid job in ways that decrease

the effect of this double load on women's participation in public life. Such political interventions tend to incorporate women more securely into a mostly male paradigm of social life without significantly changing the differences between the roles that men and women now play in society. Instead of addressing gender disparities in public and family life on a basic level, women are helped to fit into job demands.

The Liberal feminist movement's efforts to end women's underrepresentation in different spheres of public life, particularly those connected to greater status, financial reward, and authority, also demonstrate this drive towards integration rather than fundamental transformation. Second-wave liberal feminism has a history of extending mainstream liberalism's more welfarist tenets, and as a result, it opposes the pronounced individualism of most of its manifestations. In terms of fostering a feeling of communal or social responsibility and paying close attention to social justice, this second-wave approach expands the welfare strand within mainstream liberalism.

This kind of liberal feminism places a strong emphasis on combating discrimination against women as a class or group, which is indicative of its collective and social justice political programme. It is also seen from the focus on eliminating or changing societal restrictions on women's involvement in public life. While undermining the individualism inherent in mainstream liberalism, the focus of second-wave liberal feminism on enhancing women's collective legal and political status remained firmly focused on helping women become more like men. As a result, even the concerns of second-wave Liberal feminism with collective politics, with women as a class or group, are tactical and short-term rather than long-term. Its political goal, which is to allow women to reach the position of independent individuals in public life as equals of males and as equally capable of public engagement, remains recognizable as being liberal [6], [7].

Recent criticism of this practical political collectivism with its emphasis on barriers and discrimination/oppression against women has come from a number of mainly younger feminists. These third-wave Liberal feminists contend that the 1960s- and 1970s-women's movement and those who uphold its goals have a tendency to exaggerate societal barriers and a reluctance to acknowledge that women are also responsible for their own lives and position. Third-wave Liberal feminists, some of whom are referred to be anti-feminist, contend that women should assume personal responsibility rather than hide behind the label of victims in groups. This is a firm, even complete, return to the individualism of traditional liberalism. Such authors may still be considered to be in a feminist position inasmuch as they continue to believe in and support the equality of men and women<sup>7</sup>; however, they attribute more blame for women's inequality to people, and specifically to individual women, than to systemic discrimination. This approach equates to women-blaming in the writing of certain third-wave authors, such as Katie Roiphe or Rene Denfeld, but there is still a larger acknowledgement of women as a group facing prejudice in Naomi Wolf's work.

### **Liberal feminism's third wave: Naomi Wolf**

In *The Beauty Myth* and *Misconceptions*, Wolf's works on parenting and beauty, respectively, she focuses much emphasis to the societal challenges that women experience and, in traditional Liberal feminist manner, she calls for social change of these challenges. She nonetheless emphasises individual empowerment, much as other third-wave Liberal feminists. Both her political agenda and her political goal center on people. She defends 'victim feminism' for giving women a 'identification of weakness' and champions the independent person in conventional Liberal terms. Wolf advises women to take use of the power that is available. For Wolf, this



seems to be a rather straightforward issue, maybe more of an attitude or will issue. According to her, believing that masculine traits like rivalry, ambition, and violence are inherently bad hampers women's efforts to be autonomous and self-reliant.

Her power feminism honors the individual, personal accountability, public accomplishment, and a societal order based on merit. This ode to social mobility is also present in more modern works that revisit the issue of barriers facing women while maintaining a positive attitude towards women as autonomous subjects and active agents of change, particularly personal transformation. Change on an individual level leads to an outcome on an aggregate level. She reiterates liberal notions of power and the self in a pretty conventional way, saying that empowered or liberated women may change power dynamics. The analysis seldom makes any mention of the government or other social institutions, instead concentrating on the influence that empowered people taking charge of their own lives have on society as a whole. She claims that the greatest loss for many new mothers is the loss of self as a result of Misconceptions[8], [9].

In particular, Naomi Wolf situates her 'power feminism' as a continuation of the Liberal feminism of nineteenth-century philosophers like Mary Wollstonecraft. She appears to be primarily focused on the issues facing women like herself, that is, white, educated, middle-class young women.<sup>8</sup> She encourages women, for example, to form power groups to pool their resources in the same way men do. This is similar to Wollstonecraft and most Liberal feminists. She aims to integrate women and feminism with capitalism, as other Liberal feminists do. She writes, I propose specific strategies to make pro-woman action into something that is effective, popularist, inclusive, easy, fun and even lucrative. Her concept of power feminism does indeed seem to be a capitalist product.

This assertion hasn't shown to be absurd for Wolf. She has authored several books and often travels to give lectures in front of large crowds. Wolf even tries to create a brand logo for feminism in order to better market it. Her idea of the future of feminism is tied to specifically North American ideals of individual autonomy. This type of approach, with its focus on self-improvement and marketing, has a distinctly North American flavor. For instance, Wolf applauds women who possess guns as a sign of progress away from victimhood. However, her writing's cheerful self-help and encouraging tone, along with its accessibility, has often been inspiring and extremely successful in demonstrating to women what Feminism may mean to them personally in an increasingly conservative political environment. In a time when celebrities are idolised, Wolf is in fact a very marketable spokesperson for feminism, kind of a celebrity feminist. Maybe this is an important feminist principle for our time.

From this succinct and comprehensive analysis of Liberal feminism within Modernist feminism that there are several perspectives and disputes to take into account. Liberal feminism is a reformist and assimilationist philosophy. It seeks to integrate women into society as it is and get in the way of their advancement in society. If liberal feminism were a shirt, it probably had shoulder pads and pinstripes. It sports successful attire. Its readiness to accept and even praise the benefits of traditional capitalist democracies, however, gives it a version of feminism that is relatively well-accepted and, as a result, maybe the only popularist feminist platform available today. The Liberal feminist who offers a kind of academic interpretation of Wolf's popularism is the subject of a more in-depth examination in the next chapter[10], [11].



## CONCLUSION

The paper also considers how liberal feminism still has value in tackling gender inequality in contemporary culture. It looks at how liberal feminist ideals have changed over time to include intersectional viewpoints, which acknowledge the connections between gender and other social categories including race, class, and sexual orientation. A more sophisticated understanding of how multiple types of oppression interact and impact women differently is made possible by this intersectional approach. This concludes by highlighting the significance of liberal feminism within the larger context of modernist emancipatory feminisms. Liberal feminism has been instrumental in upending patriarchal systems and furthering the cause of gender equality by promoting human liberty, legal rights, and equal opportunity. To address the ever-evolving intricacies of gender inequality and social injustice, the movement also asks for continual reflection and change. This chapter offers a fundamental overview of liberal feminist history, concepts, and current importance in the fight for gender liberation as modern feminist groups continue to be influenced by liberal feminist ideas.

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## CHAPTER 11

### A Comprehensive Overview: Women, Gender and Sexuality

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#### ABSTRACT:

An interdisciplinary academic area called Women, Gender, Sexuality Studies (WGSS) conducts critical analysis of the intricate and dynamic links between gender, sex, and power. An introduction of WGSS, its historical evolution, and the underlying ideas that guide its investigation of gender identities, roles, and experiences are given in this chapter. This research intends to emphasize the value of WGSS in resolving structural inequalities and establishing a more equitable and understanding society by emphasizing its role in fostering social justice and inclusion. The chapter starts by tracing the origins of WGSS in history, recognizing the impact of feminist movements and their attempts to overthrow the conventional patriarchal systems that have sustained gender inequality. It examines the formation of the topic in academia as researchers realized the necessity for a thorough examination of gender and its interactions with other social categories such as race, class, and sexual orientation. WGSS emerged as a reaction to the constrained views on gender present in conventional academic fields, with the goal of supplying a forum for many voices and experiences. Additionally, this chapter explores the fundamental ideas at the heart of WGSS. It analyses how the idea of a strict gender binary is contested by the contrast between sex biological features and gender socially created roles and expectations. The research also highlights the significance of intersectionality, which acknowledges how different facets of identity, such as race, class, and sexual orientation, interact to influence a person's chances and experiences.

#### KEYWORDS:

Gender, Political, Sexuality, Social, Women.

#### INTRODUCTION

The adage the personal is political may have caught your ear at some time in your life. This expression, made popular by feminists in the 1960s, emphasises the ways in which historical, institutional, and cultural factors, as well as political, economic, and cultural influences, impact our individual experiences. Socially-lived theorising is the process of developing feminist ideas and knowledge based on the real daily experiences of social groups who have typically been left out of the academic knowledge-production process. A commitment to the creation of knowledge informed by the experiences of members of marginalized groups, such as women, people of color, people from the Global South, immigrants, native Americans, gay, lesbian, queer, and trans people, as well as the poor and working-class, is a crucial component of feminist analysis.

Because those with fewer resources and power often feel the impacts of oppressive social structures in ways that members of dominant groups do not, feminist theorists and activists say that theorising should start with the experiences of the marginalized. Participants in a social system have knowledge about its leaders and their own experiences from the bottom up,

although the opposite is seldom true. As a result, their experiences provide a more thorough understanding of how power systems function. For instance, a narrative about the growth of industry in the 19th century written from the viewpoint of factory owners would highlight capital accumulation and industrial advancement. However, as industry developed in the 19th century, immigrant workers were forced to put in sixteen-hour days in order to provide for their families and themselves while also pushing for employers to recognise trade unions in order to gain fair pay and the eight-hour workday. You will have quite diverse views about how industrial capitalism evolved and functions now, depending on whatever point of view you start with. Socialist feminist theories, radical sex feminist theories, black feminist theories, queer feminist theories, transfeminism theories, feminist disability theories, and intersectional feminist theories are just a few examples of the many different theories and analytical perspectives that make up feminism[1], [2].

The idea that knowledge is affected by the political and social environment in which it is produced runs across all of these feminist ideas. Feminist theorists contend that reflexivity understanding how one's social position effects the ways that they view the world is of the highest relevance when generating theory and knowledge. They acknowledge that all knowledge is generated by persons occupying certain social places. People's social experiences are shaped by their mixture of many identities, which occur simultaneously, as they hold certain social positions based on their race, class, ethnicity, gender, sexual orientation, age, and ability. No one is ever without several identities; however different aspects of their identities may be more prominent at particular times than others. Therefore, identity categories are intersectional and affect how people experience the world and how they perceive and comprehend it.

In the US, we are often taught that humans are self-actualizing, self-activating beings. Everyone has a distinct personality, and everyone has the potential to succeed, we are constantly told. Feminists contend that although individuals do have agency the capacity to shape the course of their lives they also have that power constrained or increased by their social position. Situating one's experiences within several levels of analysis micro, meso, macro, and global is a potent method to comprehend oneself and one's numerous identities. These levels of analysis provide several analytical vantage points for comprehending social phenomena. A more profound knowledge of how our own lives is affected by forces bigger than ourselves may be gained by connecting personal experiences to broader, structural forces of race, gender, ethnicity, class, sexuality, and ability. This understanding can then be used to consider how we could strive to alter these larger forces of inequality. These levels of analysis allow us to place every day experiences and phenomena within larger, structural processes that shape entire populations, much like a microscope that is initially set on a view of the tiniest parts of a cell, then moves back to see the whole cell, and finally pulls one's eye away from the microscope to see the whole organism.

The daily interactions we have as individuals on the street, in the classroom, or at a party or other social event take place at the micro level. Thus, analysis at the micro-level focuses on people's experiences. The meso level of research shifts the focus backward to examine how communities, groups, and organisations shape social life. A meso level examination would examine how schools educate youngsters to become girls and boys, how religions influence gender expectations for women, or how workplace rules facilitate or impede the gender transition and acknowledgment of trans and gender nonconforming employees. Governmental structures, programmes, and policies, as well as ideologies and identity categories, make up the macro level.

In this manner, national power structures and cultural beliefs about diverse racial, social, and sexual groups are propagated at the macro level via a variety of national institutions, including the media, education, and policy. Transnational production, commerce, and migration, global capitalism, and transnational trade and law bodies round out the global level of study. These are more powerful transnational factors that have an impact on our daily lives but that we often overlook or fail to recognize [3], [4].

## DISCUSSION

Recognize how inequities are structured by race, class, gender, and sexuality not simply by individual choices when we acknowledge how forces bigger than ourselves act in influencing the successes and failures we often assign to individual decisions. The micro, meso, and macro/global levels of analysis are used to analyse these problems, providing a more integrated and thorough knowledge of both the effects of macro structures on individuals as well as the effects of personal experience. We are able to link microeconomic, cultural, and social issues that are perceived at the micro level as personal issues to macroeconomic, cultural, and social issues by examining labour in a maquiladora at several levels of study. This enables us to organise with others who experience the same impacts from the same economic, cultural, and social difficulties in order to question and solve these issues. It also offers us the potential to build socially-lived theories.

### Important Field Introduction

There was a time when it appeared like males were the ones who created, wrote about, and consumed all information. This held true for the canons of music and literature as well as the scientific and social sciences. When seen through the lens of mainstream education, research, textbooks, and works of art were nearly exclusively written by white males. College students often finished whole courses by reading just the writings of white males who worked in such disciplines. Women, sexuality, and gender Studies is an interdisciplinary area that questions the creation of knowledge from an androcentric perspective. Androcentrism refers to the elevation of male- and masculine-centered worldviews. According to feminist researchers, the widespread belief that knowledge is generated by unbiased, rational scientists often conceals the ways in which scientists develop knowledge from gendered, racialized, classed, and sexualized cultural viewpoints.

Biologists, anthropologists, sociologists, historians, chemists, engineers, economists, and academics from almost every recognisable department in a university are examples of feminist scholars. Scholars in this discipline come from a variety of academic backgrounds, which promotes collaboration across disciplinary lines within the university to better comprehend society. This book provides a broad introduction to the study of women, gender, and sexuality. We locate our framework, which is significantly influenced by a sociological lens, inside wider interdisciplinary feminist discussions since all of the writers of this textbook are educated as both sociologists and interdisciplinary feminist academics. Instead of exhaustively addressing every subject, we focus on some of the main aspects in the discipline.

These circumstances were brought to light and addressed by the Civil Rights Movement and Women's Liberation Movement in the middle of the 20th century. Universities all around the United States established Women's and Ethnic Studies departments starting in the 1970s in response to student demonstrations and wider social movements. These academic units recovered

forgotten history and put underrepresented communities at the centre of knowledge creation. Early iterations of the discipline focused on the experiences and opinions of white, middle-class, heterosexual women since they had the most access to education and engagement. Lesbian and queer women, women of colour, immigrant women, women from the global south, poor and working-class women, and their studies and contributions all became crucial to women's studies in the next decades. The discipline has more recently grown centred on assessments of disability, sexualities, masculinities, religion, science, gender diversity, imprisonment, indigeneity, and settler colonialism. Many Women's Studies departments are now renaming themselves Women, Gender, and Sexuality Studies departments as a consequence of the field's expansion to include a larger spectrum of experiences and objects of investigation[5], [6].

In the United States, the concepts of gender and sexuality are inextricably linked, and this is acknowledged by feminist researchers across a wide range of themes, not only for women but also for men and individuals of all genders. You can anticipate learning about the effects of rigid beauty standards portrayed in media and advertising, why childrearing by women may not be as natural as we believe, the history of the gendered division of labour and how it continues to affect men and women's economic lives, the particular health issues raised by proponents of reproductive justice, and the links between women who work in factories in the developing world and women who buy products.

Women, Gender, and Sexuality Studies provides a new way of looking at the world, not just a list of subjects. Scholars in this subject integrate ideas across institutional settings, emphasise the wisdom that emerges from personal experience, and pay attention to marginalised identities and groups rather than ignoring them. Most modern WGSS researchers try to see the world through the perspective of intersectionality in response to the significant criticisms of transnational, post-colonial, queer, trans, and feminists of colour. In other words, they see several oppressive regimes operating together rather than independently. For instance, how someone perceives sexism relies on their experiences with racism, economic inequality, ageism, and other types of marginalisation in specific historical and cultural settings, in addition to their gender. Women, Gender, and Sexuality Studies promotes social change and offers insight into how this might be done by acknowledging the complexity of the social reality.

### **Identity Symbols**

Each individual who selects the terminology with which they identify themselves uses language in a manner that is intensely personal, political, passionately debated, and ever-evolving. It's crucial to pay attention to language, accept people's self-referential phrases, and show that you are aware of their subtleties. The definitions of certain terminology used in identity are listed below. This discussion is not intended to be conclusive or prescriptive; rather, it intends to illustrate the linguistic stakes, the disputes around them, and the context in which they are used, as well as to help students grasp terminology that is commonly used in class discussions. Although there are no hard-and-fast guidelines about what constitutes correct or incorrect language, these phrases represent much more than just personal preferences. They depict personal and social history, continuing intellectual discussions, and contemporary politics.

### **Coloured people vs people of colour**

All people who are non-white are collectively referred to as people of colour in today's society, which is most prevalent in the United States. Given that it covers typical instances of racism, it is

a political, coalitional phrase. POC is the abbreviation for people of colour. Most people of African heritage now want to be referred to as black or African American. These are frequently used terminology, yet sometimes they mask the particularity of people's history. Other favoured words include African diasporic or African descent, which are used to describe individuals who have moved via Latin America and the Caribbean yet can trace their ancestry to Africa. Before the civil rights movement in the United States and the United Kingdom, persons of African heritage were derogatorily referred to as coloured people in both countries. As it refers to a period when many institutional manifestations of racism during the Jim Crow era were lawful, the phrase is today seen as derogatory.

### **People with disabilities as opposed to disabled people**

While some individuals like identity-first wording, others prefer person-first phrasing. People-first languages prioritise the individual above their handicap. As an example, a woman with vision impairment. By using this word, individuals without impairments are encouraged to see persons with disabilities as humans. PWD is an abbreviation for people with disabilities. People-first language has received criticism for trying to remove itself from the handicap, which might be seen as undervaluing the impairment even while it seeks to humanise. People who choose identity-first language often stress the need of accepting their handicap as an essential, valuable, and part of who they are feature of themselves from which they do not want to disassociate themselves. For instance, a disabled person. The use of such terminology highlights the ways in which society impairs people. Many words that are used often have ableist connotations, including adjectives like lame, retarded, crippled, and crazy. It's crucial to refrain from utilising these expressions. Although, as was already indicated, both people-first and disability-first terminology is now in use when discussing disabilities, this is not the case when discussing race[4], [7].

People who identify as a gender that was not assigned to them at birth are often referred to as transgender. Although the phrase is most often employed as an adjective, some people use it as a noun to refer to themselves. Because it emphasises ascription and undercuts self-definition, the word transgendered is not recommended. Trans is an acronym, and people now seem to use it more often than transgender when referring to themselves. Both internal and societal transitions occur. Some transgender people don't alter their gender identification throughout the transition since they have always identified that way. Trans is an inclusive catch-all phrase. This includes all gender identities that aren't normal. Beyond binary identifications of man or woman, gender identities are referred to as non-binary and genderqueer. In the 1990s and 2000s, the terms genderqueer and non-binary gained popularity within queer and trans groups, respectively.

Agender, which means without gender, may refer to individuals who do not identify as one gender over another, who identify as non-binary or gender neutral, who have an ill-defined identity, or who are apathetic to gender. People who are gender fluid encounter changes in their gender identities. The word transsexual refers to someone who identifies with the opposite gender from the one that was given to them at birth. It is a medicalized phrase that denotes a binary concept of gender. Individuals who identify as the gender given to them at birth are referred to as cis or cisgender. Some individuals like the term non-trans. These are only a few fundamental and often used terminology; there are more names for gender identification as well. Again, the focus of these words is on perceiving people as they see themselves and using names and pronouns that they have chosen for themselves.



### **The terms queer, bisexual, pansexual, polyamorous, and asexual,**

When used as a catch-all phrase for all LGBTQ people, the term queer refers to a non-categorical sexual identity. The phrase was formerly derogatorily used, but it was revived as a self-referential phrase in the United States in the 1990s. Despite the fact that many people now identify as queer, some still find the term offensive and object to it. A sexual orientation characterised by attraction to either men or women is known as bisexuality. This has been criticised as having a binary view of sexuality that excludes those who do not identify as either males or women. A sexual identity known as pansexual is characterised by a desire for individuals of any gender or sexual orientation. Individuals may be in numerous mutually beneficial and individually negotiated sexual and romantic relationships at once in polyamorous or non-monogamic partnerships, which are open or non-exclusive. Asexuality, sometimes known as ace, is a sexual identity characterised by a lack of or infrequent sexual desire as well as a low or nonexistent interest in sexual engagement. Asexual differentiate between romantic and sexual attraction, defining multiple sub-identities grouped under the ace label. The words heteronormativity, homonormativity, and Hom nationalism are discussed in a number of the book's later chapters; these terms do not serve as identity identifiers; rather, they are used to explain how sexuality is created in society and the politics surrounding such constructions.

Latino refers to persons in the United States who are of Latin American ancestry or heritage, while Latin American refers to those in Latin America. A male of Latin American origin or ancestry is referred to as a Latino, whereas a woman of Latin American origin or descent is referred to as a Latina. To avoid the sexist usage of Latino to refer to all people, the names Latino/a and Latin both contain the -o and -a suffixes. Mexican Americans, Xicano, and Chicano/a are terms that may be used interchangeably to refer to persons who are of Mexican heritage or origin in the United States. Depending on their political stance, people may prefer to use the terms Chicano or Mexican American, as Chicano has the connotation of being politically active in working to end oppression of Mexican Americans and is linked to the Chicano literary and civil rights movements of the 1960s and 1970s. Mexicano, the Nahuatl name for the native Mexica Aztec Empire, is reduced to Xicano. To emphasize their native heritage, some people prefer the Xicano spelling. Latinx and Chicax expressly encompass people of all genders by excluding either the -a or -o gendered ends. individuals of country descent who speak the Spanish language are referred to as Hispanics, as are individuals and countries having a historical connection to Spain. Despite the fact that many individuals may be classified as both Latinx and Hispanic, there are certain exceptions. For instance, whereas Spaniards are Hispanic but not Latino, Brazilians are Latin American but neither Hispanic nor Latino. These phrases were first used in the context of the Anglophone-dominated United States, where preferred terminology differ geographically and politically[1], [8].

### **The terms indigenous, First Nations, Indian, Native, Native American, American Indian, and Aboriginal**

Indigenous people are individuals who are descended from a region's first occupants, as opposed to those who have established, inhabited, or colonised the area. Specific terms differ; for instance, people in Australia are referred to as Aboriginal whereas those in Canada are First Nations. The word Aboriginal is also sometimes used in Canadian contexts, mostly in settler-government papers and less often as a term of self-definition. Individuals might identify as Indian, American Indian, Native, or Native American in the United States, or, probably more

often, they can refer to their own tribes or countries. Like other recovered words, Indian has a complicated history, so outsiders should use it with extreme caution.

**The terms Global South, Global North, Third World, First World, Developing Country, and Developed Country are used.**

Political and economic differences are referred to as the Global South and Global North. Africa, Latin America, certain regions of Asia, and the Middle East are considered to be sections of the Global South and are often socioeconomically and politically underprivileged. Global North countries, which include the United States, Canada, Western Europe, and some of East Asia, often have socioeconomic and political advantages. The hierarchical definitions of terms like Third world, first world, developing nation, and Developed country have been criticised. These interpretations place more weight on regions with more resources and political clout. Even though the phrases Global South and Global North have the same negative connotations, they are often used nowadays. Additionally, despite the fact that the word Third World has proved problematic, some individuals do not see it negatively and use it as a self-referential phrase. Additionally, the phrase Third World has traditionally been used to refer to countries and people that are not allied with either the capitalist First World or the communist Second World, particularly during the Cold War. To create Black Studies and the Ethnic Studies College, for instance, and to show their support for one another during the 1968–1969 Third World Liberation Strike at San Francisco State University. Throughout the book, we utilise specific terms like Global North/South while acknowledging that there are problematic elements to these usages [3], [9].

**The terms transnational, diasporic, global, and globalisation**

Different definitions of transnational exist. Transnational depicts migration and the transcendence of boundaries, denotes a kind of neocolonialism, denotes the Igboization of social movements, and signifies the nation-state's declining importance in the present iteration of globalisation. It is also used interchangeably with the term diasporic. The words transnational women's movements or global women's movements, according to Inderpal Grewal and Caren Kaplan, are used to describe U.N. Women's conferences, worldwide feminism as a political and activist movement, and human rights campaigns that implement new governmental structures. The World Trade Organisation, capitalism, neoliberalism, and other non-national institutions are all criticised and mobilised against by transnational feminist academics and social movements, according to Chandra Mohanty.

Transnational in this context refers to cross-national solidarity in feminist activism. As national and global histories influence transnational social movements, Grewal and Caplan have noted that transnational feminist study also explores how these movements have been linked to imperialism and colonial processes. The word transnational is far more often used in feminism studies and politics than international, which has been criticised for emphasising the nation-state. Although the state may play a significant role in transnational processes, this does not imply that the state is the most significant player in these processes. Although all of these processes are technically global, the word global is often seen as an ethereal concept. It appeals to the idea of global sisterhood, which is often questioned since it presumes a level of female solidarity that frequently does not exist.

## CONCLUSION

This multidisciplinary approach offers a comprehensive viewpoint that represents the richness of gender identities and experiences, allowing for a nuanced understanding of gender problems. Additionally, this chapter emphasises how important WGSS is for advancing inclusion and social justice. In order to question and dismantle oppressive beliefs, as well as to promote the elimination of discriminatory institutions, WGSS examines power structures and social norms. It focuses on how crucial it is to acknowledge and value other perspectives in order to build a society that is more inclusive and fairer. The relevance of Women, Gender, Sexuality Studies as an academic field that critically analyses the production and effects of gender, sex, and sexuality is emphasised in this chapter's conclusion. WGSS supports the continuous fight for social justice and gender equality by creating a greater awareness of the complexity of gender identities and social systems. WGSS offers a wide and varied framework for tackling structural inequities and constructing a more compassionate and inclusive society since it is an interdisciplinary discipline.

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## CHAPTER 12

### Socialism of Construction: Building a Collective Future

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#### ABSTRACT:

In the early 20th century, socialism of building also known as socialist construction or socialist development became a prominent economic concept, particularly in the Soviet Union. An overview of the idea of socialism of building, its guiding principles, and its application in the Soviet setting are given in this chapter. The research intends to illuminate the salience of this economic method in the broader discussion on socialist economies by analysing the main characteristics, successes, and difficulties of this economic approach. The chapter starts off by describing socialism of construction as the stage of socialist development during which a revolutionary society attempts to create a new socio-economic system. In order to achieve a classless society, this concept emphasises the need of industrialization, infrastructural growth, and the construction of a controlled economy. It explores the ideas of socialist figures like Joseph Stalin and Vladimir Lenin, who promoted the quick conversion of a country with a rural economy into an industrial superpower via centralized planning. This chapter also looks at the fundamental tenets of construction socialism, which included collectivization of agriculture, rapid industrialization, and the creation of state-owned businesses. It examines the justification for these policies, with special emphasis on how they help societies break away from capitalist systems and promote modernization, self-sufficiency, and fair resource allocation.

#### KEYWORDS:

Gender, Political, Sexuality, Social, Women.

#### INTRODUCTION

A social structure is a collection of enduring social norms, behaviours, and institutions that might be difficult to see in action in our day-to-day lives. Although they are invisible, they function much like the visible structures we can see, such as skeletal systems and buildings. Bones give the human body its shape, thus the organs and arteries that make up the rest of our bodies are located there because of the support that bones provide them. Structures restrict potential, yet they are not inherently impervious to change. For instance, although our bones may degrade over time, sustain severe wounds, or be harmed by illness, they never spontaneously move or vanish. Social systems operate in a similar manner.

The institutions of society are the components of a social structure, the areas of social life that guide potential activities. Social institutions may be interpreted to encompass, among other things, the government, the workplace, education, family, law, media, and medical for the time being. These will be discussed in more depth later. When we argue that these institutions direct or structure potential social activity, we imply that inside these places there exist laws, customs, and practises that restrict what may be done. For instance, although most people hold the notion of family dear, historically and culturally, family structures have been extremely regimented and

regulated. The typical North American family, according to Dorothy Smith, consists of two heterosexually married parents, one or more children, and grandchildren. It also involves a division of labour where the wife/mother is in charge of the majority of caregiving and childrearing while the husband/father earns a higher salary. This is the standard to which families are most often compared, despite the fact that they differ in a variety of ways. The state, the legal system, and the media do not support these options in the same way that they support the SNAF, despite the fact that we may regard our pets, friends, and lovers to be family[1], [2].

The axes of gender, race, class, sexuality, ability, age, country, and religious identities are used to organise power in American culture. Thus, identities are not only descriptors of individuals, but grant a certain amount of collective access to the institutions of social life. Some identities are more highly valued, or more normalized, than otherstypically because they are contrasted to identities thought to be less valuable, or less normal. This does not imply, for example, that all white people are the same or that they have the same influence on all people of colour. It does imply, however, that middle-class white women generally possess greater social clout than middle-class women of colour. The idea of intersectionality is crucial in this situation. All people have various facets to their identities, and they all concurrently experience benefits related to their identities that are valued by society and disadvantages related to identities that are not valued by society.

Consequently, a white, heterosexual middle-class woman may have disadvantages when compared to a white, heterosexual middle-class man, but she may also benefit in some situations when compared to a black, heterosexual middle-class woman, a white, heterosexual working-class guy, or a white, lesbian upper-class woman. We may see that certain persons have more widespread institutionalized influence and access to resources than do others at the upper levels of social organisation. We refer to the prejudice and access restrictions that women experience as sexism. Genderism defines the prejudice and access restrictions that transgender individuals experience. Racial discrimination and access restrictions are based on socially formed meanings rather than biological disparities, and are referred to as racism.

Classism is the term used to characterise prejudice based on social class, as well as restricted access to material riches and high social position. Ableism is the term used to characterise prejudice based on a person's physical, mental, or emotional limitations or their inability to fully meet their requirements, including fully participating in social activities. These -isms represent prevailing cultural beliefs that males, non-trans individuals, white people, middle- and upper-class people, and non-disabled people are superior than women, trans people, people of colour, poor people, and people with disabilities. However, -isms are more prevalent than prejudices against women, transgender people, people of colour, the underprivileged, and people with disabilities. Since affluent, white males were the only true citizens of the nation at the time of its creation, the institutions of social life, such as employment, law, education, and the like, were constructed to their advantage[3], [4].

The sexist, genderist, racist, classist, and ableist structures of these institutions have altered dramatically throughout time in reaction to social movements and more progressive cultural trends, but they still exist in various forms today. The term racialization and other words ending in inaction, which have a similar sound to -isms, are used to emphasize the construction or processes through which various forms of difference have been given meaning and significance. Similar to the skeletal system of the human body, social systems are not fully

impervious to change. Over time, social movements based on identities have campaigned for more equality and altered social systems in both the US and other countries. These conflicts do not, however, instantly transform society; some of them linger for decades, even centuries, or even never end. Slowly evolving social structures and institutions may and do change as a result of the coordinated actions of people, social movements, and social organisations. According to the theory of knowledge known as social constructionism, traits that are often believed to be unchangeable and exclusively biological, such as gender, race, class, ability, and sexual orientation, are really the result of human definition and interpretation that is affected by cultural and historical settings. Since cultural categories like men, women, black, and white are conceptions that are generated, altered, and reproduced via historical processes within institutions and society, social constructionism emphasises these processes.

We do not want to imply that there is no bodily variance among individuals, but rather that we create categories based on certain physical traits, give these categories meanings, and then assign individuals to the categories based on their bodies or other physical characteristics. For instance, according to the one-drop rule, everyone with an African ancestor is deemed black, regardless of appearance. In Brazil, where many people with African heritage are believed to be white, racial conceptualization and hence racial classifications are distinct. This demonstrates how identity categories are founded on societal assumptions and interpretations rather than strictly biological traits. In different historical eras and across various communities, categories are challenged and redefined; they are not natural or stable, and the borders surrounding them are always altering. Since groups of people, experiences, and reality are defined and organized in cultural settings, the social constructionist approach is concerned with the meaning established via these processes.

## DISCUSSION

The essentialist or biological determinist worldviews that often support the common-sense ways in which we think about race, gender, and sexuality are challenged by social constructionist theories of the world. According to essentialism, traits of individuals or groups are greatly impacted by biological causes and, as a result, are mostly consistent throughout all human cultures and historical eras. The notion that a given truth is a necessary natural part of the individual and object in question is a central tenet of essentialism. In other words, an essentialist view of sexuality would contend that, in addition to the fact that everyone has a sexual orientation, this orientation does not change throughout the course of time or space. In this illustration, sexual orientation is a given truth to people; it is believed to be innate, dictated by biology, and crucial to their existence.

Biological determinism is a common foundation for essentialism. A broad theory that claims that a group's biology or genetic composition determines its social, political, and economic fate is known as biological determinism. For instance, sex is often seen as a biological fact, whereby bodies are divided into two groups, male and female. It is considered that the chromosomes, reproductive systems, hormones, and sex characteristics of these bodies are sex-specific. Nevertheless, depending on the context in which it is defined, the term sex has been interpreted in a wide variety of ways. The presence or absence of ovaries was the ultimate criterion of sex in the late 19th and early 20th centuries, according to feminist law professor Julie Greenberg, when reproductive function was considered one of a woman's essential characteristics. Thus, the heteronormative premise that women are characterised by their capacity for procreation was



what led to the emergence of sexual difference. In the modern US, medical professionals often determine sex based on the look of genitalia rather than the existence or absence of ovaries[5], [6].

Different interpretations of sex refer to two more fundamental facets of how reality is socially constructed. First of all, it demonstrates how social construction extends even to things that are often considered to be natural or essential in the world. According to human knowledge systems, perceptions of nature vary throughout time and space. Second, power and privilege-based relationships are where social creation of difference takes place. These two facets of the social construction of difference, according to sociologist Abby Ferber, cannot be comprehended separately and must instead be seen as a whole. She contends that oppression and inequality really give rise to notions of fundamental racial difference when discussing the formation of racial difference. Accordingly, racial categories that are seen as natural or essential are developed within the framework of racist power relations; in the case of African-Americans, this includes enslavement, laws prohibiting interracial dating, lynching, and white supremacist ideology. In order to clarify the power relations embedded in racially, gendered, or sexualized differentiations, social constructionist studies aim to better understand the mechanisms through which these distinctions develop.

Similar social constructions of disability exist in the context of ableist power dynamics. The medical model of disability presents physical, mental, and perceived difficulties as faults that must be addressed on an individual basis. The social model of disability moves the attention to the features of society that make people with disabilities less able to participate in daily life. Therefore, the term disability refers to a sort of oppression in which those who are seen as having impairments are thought to be less than those who do not, and in which impairments are despised and despised. Structures that restrict access for people with disabilities reflect this attitude. An ableist viewpoint that sees the individual rather than society as the issue challenges the notion that nondurability is normal and natural.

What effects does using a social constructionist perspective to explain the world have? A social constructionist approach contends that current disparities are not inevitable nor unchangeable since social constructionist analyses look at categories of difference as fluid, dynamic, and evolving depending on historical and geographical context. The active and emancipatory objectives of feminist groups and ideologies are particularly well served by this viewpoint. Social constructionist theories question the pathologizing of minorities who have been seen to be fundamentally or intrinsically inferior to privileged groups by focusing on the mechanisms through which inequality and power relations generate racially, sexualized, and gendered difference. Additionally, by revealing the historical, cultural, and/or institutional roots of the groups under investigation, social constructionist studies undermine the categories that classify individuals into hierarchically organized groups. In this approach, social constructionist studies expose how uneven institutions of knowledge and power produce and reproduce inequalities, challenging their categorical foundations.

### **Intersectionality**

The term intersectionality, popularized by the legal scholar Kimberli Crenshaw, designates an analytical approach crucial to studies of women, gender, and sexuality. Race, class, gender, sexual orientation, age, ability, and other aspects of identity are viewed within intersectional frameworks as mutually constitutive, meaning that people experience these multiple aspects of

identity at the same time and that the meanings of the various aspects of identity are influenced by one another. In other words, perceptions of race and how that person's race is understood always have an influence on concepts of gender and how others perceive a person's gender. A person is never seen as simply a woman, for instance, but how they are racialized affects how they are perceived as a woman. Therefore, there is no gender experience that is independent of a racial experience, and ideas of blackness, brownness, and whiteness always impact gendered experience. Age, sexual orientation, social class, and ability all have an influence on gendered experience in addition to race; similarly, gender, age, sexual orientation, social class, and ability all have an impact on race.

A certain style of thinking is necessary to grasp intersectionality. It differs from how many people think identity's function. Different from additive and single-determinant identity theories is an intersectional understanding of identity. A single determinant identity model assumes that a person's access to or exclusion from power is determined by one characteristic of identification, like gender, for example. The idea of global sisterhood, or the notion that all women worldwide have some fundamental shared political interests, concerns, and demands, is an illustration of this concept. It would make sense for women to band together in support of social change on a global level if they did have shared interests across geographical boundaries. A focus on how different cultural settings impacted by race, religion, and resource availability may really put certain women's demands at odds with those of other women is unfortunately neglected if the examination of social issues stops at gender.

As a result, this strategy hides the reality that women in various social and geographic contexts confront various issues. For women of colour or working-class white women, who had already been actively participating in the US labour market as domestic workers, factory workers, and slave labourer's since early US colonial settlement, this was not the main issue, despite the fact that many white, middle-class women activists fought for freedom to work and legal parity with men in the mid-20th century. Women from the global south, in particular, may have more pressing concerns: access to clean water, access to adequate health care, and safety from the physical and psychological harms of living in tyrannical, war-torn, or economically impoverished nations. Campaigns for women's equal legal rights and access to the labour market are shaped by the experience and concerns of white American women, however [7], [8].

The additive model of identity simply puts up privileged and disadvantaged identities yielding a little more complicated picture as opposed to the single-determinant identity model. A Black guy, for example, can have certain advantages due to his gender yet have restricted access to power due to his ethnicity. How racial and gender salary discrepancies are depicted in statistical studies and widely read news articles is one example of this kind of study. The Institute for Women's Policy Research created the table with the median salary difference shown below in 2009. Reading the data reveals that in 2009, the gender pay disparity in the US was such that overall, women made 77% of what men did. The table further breaks down the data to demonstrate how race in addition to gender affected wages. As a result, white women made 75% whereas Hispanic or Latino women only made 52.9% of what white men did.

Compared to a single gender pay gap or racial wage gap data, this is unquestionably more descriptive. The table is helpful in highlighting various structural factors that could account for differences in incomes across groups. When you first see the chart, for instance, you may ask why there are such large gaps: are they due to a general difference in skill levels, education

levels, professions, areas of residency, or occupation levels amongst groups, or are they due to something else, such as discrimination in hiring and promotion? Even though it may go against our gut, it is not helpful for estimating people's wages by filling in their gender and ethnicity. There are outliers in any group, and individual experiences varied greatly and for a number of reasons. Most importantly, although this graphic may aid in understanding the structural causes of wealth differences, it is not comprehensive.

The additive approach ignores how race and gender are racialized and gendered in our common cultural concepts of gender and race, and how these concepts organise access to resources and power, material, political, and interpersonal. In her historical research of Black sexuality representations in the US, sociologist Patricia Hill Collins has established a strong intersectional framework via her discussion of race, gender, and sexuality. Hill Collins demonstrates how modern white American society exoticizes Black people, and she cites a history of slavery and being treated like property as the source and inspiration for the imagery. African Americans were seen and treated as less than human in order to legitimise slavery. For the financial gain of plantation owners, sexual reproduction was often forced upon slaves. However, masters reframed this coercion and rape as proof of the natural and uncontrolled sexuality of individuals from the African continent.

Black males were portrayed as hypersexual bucks who had little interest in long-term relationships, but Black women were depicted as hypersexual Jezebels who became the matriarchs of their families. As a result, images of Black men and women were not entirely similar. It's vital to highlight how modern racist constructs are assumed and portrayed as personal preferences or attributes while often ignoring the context in which enslaved families were forcibly disassembled. It is startlingly simple to observe how these images continue to be present in modern media, society, and politics, for example, while talking about American welfare policies. The intersections of race, gender, and sexuality are shown by this approach. Because these identities are intertwined and reinforce one another, we cannot simply separate them. There are issues, despite the fact that the intersectional framework has provided significant insights to feminist analysis. Although the word intersectionality alludes to the mutually constitutive nature of many dimensions of identity, in reality it is most often employed to refer to the particular difference of women of colour, producing women of colour as the Other and once again centering white women.

Additionally, the intersectionality framework was developed in the context of the United States; as a result, its use reproduces the United States as the country that dominates feminist research and the Euro-American bias in women's studies. The assumption that fixed identity categories such as race, gender, class, and sexual orientation exist is another flaw in intersectionality. The concept of assemblage, in contrast, takes into account more than just qualities; it also takes into account events, activities, and interactions between bodies. Assemblage describes a collage, a grouping of items, or the process of putting something together. An assemblage approach places emphasis on how connections, patterns, and relationships among ideas contribute to their meaning. Although assemblage has been pitted against intersectionality, both concepts take into consideration the reciprocal co-constitution of identity categories [8], [9].

## CONCLUSION

The Great Famine in Ukraine and other human costs of collectivization, as well as the political persecution that followed the quick change, are covered. It also looks at the flaws and

inefficiencies of centralised planning, which subsequently resulted in resource misallocation and economic stagnation. As a paradigm for economic change in the Soviet Union, socialism of building is described in detail in this chapter. It examines its fundamental ideas, successes, and shortcomings while admitting its effect on later socialist economies. This research advances knowledge of the prospects and difficulties involved in creating socialist societies via centralised planning and state-driven growth by illuminating the complexities of this strategy. An intersectional perspective examines how identities are related to each other in our experiences and how the social structures of race, class, gender, sexuality, age, and ability intersect for everyone. Too often, the terms race and gender are used simply and incorrectly to refer to Black men, respectively. An intersectional approach fosters a more complex knowledge of the world and how people in various social groups suffer unequal access to both material and symbolic resources. This is in contrast to single-determinant and additive theories of identity.

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## CHAPTER 13

### **Beyond Binary Systems: Deconstructing Differences and Facing Challenges**

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#### **ABSTRACT:**

The deep relevance of confronting binary systems and constructs of difference in modern academic, social, and cultural settings is explored in this chapter. The research examines binary thinking, which divides the world into categories like male and female, black and white, and heterosexual and gay. This chapter illustrates the transformational possibilities of adopting more flexible and inclusive understandings of identity and human experience by challenging the limits and negative effects of such strict categorizations. The chapter starts by putting binary systems and constructs of difference in their historical context and tracking their occurrence in diverse cultural, religious, and scientific settings. It investigates how the historical persistence of inequality, marginalization, and the erasure of many identities and experiences may be attributed to binary thinking. It also looks at how these systems have influenced cultural norms, supporting repressive power structures that favors certain groups and disadvantage others. Additionally, this chapter highlights how essentialist concepts of gender and identity are being contested by academics, activists, and communities today. It emphasises the need of recognising and validating different experiences by highlighting the role of intersectionality in this discourse, as people experience many interrelated types of privilege and oppression. This chapter also examines how questioning binary systems might lead to a society that is more tolerant and inclusive. It examines how accepting variety and the fluidity of identities promotes better empathy, comprehension, and comradery across various cultures. Individuals and society may struggle to destroy oppressive systems and create a more just and compassionate world by challenging conceptions of difference. The research also emphasises how activism, the media, and the arts help to challenge binary thinking. Individuals and organisations combat stereotypes and spread understanding of the richness of human identities and experiences via literature, cinema, visual arts, and social movements.

#### **KEYWORDS:**

Binary, Gender, Intersex, Sex, Transgender.

#### **INTRODUCTION**

White and black. both male and female. Poor and wealthy. LGBT and straight. handicapped and physically fit. Binaries are social constructions made up of two elements that are presented as being inherently opposed and unchangeable. Binary systems are a reflection of how these opposing notions have been incorporated into our society. As a consequence, social groupings' distinctions are emphasised to the point where they seem to have no commonalities. Men are from Mars and women are from Venus is an illustration of this. males and women are often compared in a crude manner that relies on clichés when it comes to their differences: males are powerful, women are weak; men lead, women assist. Binary ideas conceal the nuanced reality

and diversity in the social identity space. Additionally, they exclude the presence of persons who may identify with many categories or with none of the presumptive categories, such as those who are multiracial or mixed-race and those with non-binary gender identities. Men and women both possess physical strength and emotions, as is generally known. However, from a binary viewpoint, men and women are assumed to be completely different. Males and women are somewhat defined in opposition to one another, with males being characterised as not women and women as not men. As a result, our perceptions of women have an impact on how we see males. We can examine how men and women, Black and White, etc., may not be that drastically different after all by conceptualizing multiple various identities rather than seeing aspects of identity like race, gender, class, ability, and sexuality as containing only two dichotomous, opposing categories [1], [2].

### **System of Sex, Gender, and Sexuality**

Gayle Rubin invented the term sex/gender system, also known as the sex/gender/sexuality system, to refer to the set of arrangements by which a society transforms biological sexuality into products of human activity. In other words, Rubin argued that cultural factors contribute to the connections between biological sex, social gender, and sexual desire. In this instance, gender is the social product that we associate with ideas of biological sex. In our heteronormative society, unless proven differently, everyone is believed to be heterosexual. Based on their judgements of an individual's external physical appearance which is believed to reflect their biological sex characteristics, people develop assumptions about how others should behave in social situations and whom they should find attractive. The biological determinist idea that all individuals given the gender of female at birth would identify as women and be attracted to males was contested by Rubin.

According to a biological determinist perspective, where biology is destiny, this is how things were meant to be. This viewpoint, however, disregards human action. Humans have an influence on the social structures of society. Social constructionists hold that many things we commonly take for granted as conventional ways of living actually reflect deeply ingrained power relationships between different social groups. These power relationships are reproduced in part through socialisation processes, during which we pick up social norms from our families, friends, and communities. The fact that a person is assigned as a woman does not automatically make her the better carer for the kid or provide her natural instincts that male-assigned persons do not.

For instance, the practise of having women care for children has a long history. We notice creche providers, nannies, primary school instructors and babysitters among the women who care for children in addition to moms. All of these vocations have a significant female preponderance, yet they are also all economically undervalued. These workers get pitiful salaries. According to one survey, childcare workers in New York City earn on average less money than parking lot attendants. The fact that mothering is not considered labour but rather a woman's natural behaviour means that she is not paid in a manner that adequately rewards the difficulty of the task. If you have ever spent a whole day watching children, multiply your experience by eighteen years before attempting to claim that this is not labour. Although males are as capable of doing this labour as women are, there are no corresponding societal expectations placed on men. Additionally, some claim that hired carers would earn far more money if they were predominantly males. Men really make more money and advance more quickly than women in fields where women predominate. The glass escalator is the term used to describe this



phenomenon. This example demonstrates how social processes create distinctions between men and women, not the other way around, as social constructionist Abby Ferber contends[3], [4].

### **Gender and Sex: Intersex and Transgender**

The assumption that there are only two genders, male and female, obscures gender variety and erases the presence of those who do not identify as either. In our society, there is a gendered presumption that everyone who was given the gender female at birth would identify as a woman and that all women were given the gender female at birth. While this is true for cisgender people those who identify with their gender assignment not everyone can say the same. Some persons who were born with the gender assignment of male identify as women, whereas others who were born with the gender assignment of female identify as males. This demonstrates the distinction between gender identity, which one determines about themselves, and gender assignment, which physicians assign to children based on the look of genitalia. The concept of a single sex or gender identity is put to the test by the presence of transgender persons, or those who do not identify with the gender they were given at birth.

For instance, trans women, who identify as women despite having male bodies given to them, demonstrate that not all women are born with feminine bodies. The biological determinist claim that biological sex determines gender identity is refuted by the existence of trans persons. Although transgender persons often experience a shift in their social gender identities, they may or may not undergo surgery or hormone treatments to transform their physical bodies. Non-binary, genderqueer, or any term for someone who does not identify as male or female may be used to describe them. Instead of the gendered pronouns she/her or he/his, some people may choose to adopt gender-neutral pronouns like ze/hir or they/them. Pronouns and gender identities cannot be seen on the body, hence trans groups have developed methods of vocally inquiring and declaring one's pronouns when conveying gender pronouns.

The idea of a binary biological sex is profoundly contested by the occurrence of sex variants. Intersex refers to differences in sex traits such chromosomes, gonads, sex hormones, or genitalia. Individuals with sex characteristic variations have bodies that do not correspond to the normal societal notions of what is male or female. The term intersex, like female and male, is a social construction that people have made to describe bodies that they don't consider to be clearly female or male. The word primarily denotes the biological variance that already exists across bodies; bodies are not inherently intersex; we only refer to them as such. The word intersex is a little deceptive since it implies that humans have fully developed male and female reproductive systems, which do not truly exist; intersex simply refers to biological variety. Therefore, it is incorrect and disrespectful to describe to intersex as being hermaphrodite. There are several distinct biological variants for sex. For instance, Klinefelter Syndrome refers to having one Y and many X chromosomes.

Does the existence of multiple Xs indicate that the subject of XXY is female? Does the existence of a Y indicate that the subject of XXY is a man? These people have intersex chromosomes, which means they are not obviously male or female. Some individuals have genitalia that other people would see as unclear. As rare as it may seem, this is not. According to the Intersex Society of North America, 2,000 babies each year or 1.5% of the population have sex variants. Why then isn't this information more widely known? Many people who are born with genitalia that are difficult to categorise as male or female have genital surgery in their early years, throughout their adolescence, and/or into adulthood in an effort to resolve this obvious

ambiguity. For children with genital appendages less than 2.5 centimetres, surgeons lower the size of the genitals to make them seem more typically female and less masculine; for infants with genital appendages larger than 2.5 centimetres, they reduce the size and designate them female.

In each case, doctors figuratively build and repair people's bodies to conform to the prevalent, binary sex/gender paradigm. Many individuals find these procedures and the social treatment they get to be distressing since they are often carried out without patients' awareness of their sex variation or permission. Parents and physicians may defend this practise as being in the best interest of the child, but many people find this to be untrue. After years of doctors keeping this information from them, people often learn about their chromosomal make-up, surgery histories, and/or intersex status from their medical records as adults. Due to scar tissue, deformity, medical issues, and/or recurrent infections, operations may not always result in natural-looking bodies. Psychological anguish may sometimes be a side effect of the operations. Furthermore, many of these procedures entail sterilisation, which may be seen as a component of eugenics initiatives that seek to eradicate intersex persons[5], [6].

As a result, the procedures are shrouded in a lot of shame, secrecy, and treachery. In order to put an end to these nonconsensual surgical procedures and to campaign for intersex health care that is patient-centered, intersex activists in North America started organising in the 1990s. Then, more extensive global initiatives were launched, and Europe has had greater success than the initial round of mobilisations. The first person ever to sue a physician who removed their patient's internal reproductive organs without their knowledge or permission was Christiane Völling of Germany in 2008. In order to safeguard those who have sex and gender differences, Malta was the first nation to enact legislation making these procedures unlawful. The most well-known intersex advocacy group in the United States is Accord Alliance; although they provide advice and information to carers and doctors, they prioritise raising standards of care above pushing for legislative reform. Due to the work of intersex activists, it is becoming less customary to operate on children and more common to wait and let them make their own judgements about their bodies. There isn't any data on how often nonconsensual procedures are still carried out in the United States, but given that no institution has completely adopted the Accord Alliance's standards of care, we may assume that they are.

## DISCUSSION

Though the phrases intersex and transgender are sometimes used interchangeably, they relate to quite distinct identities. Recap: persons who identify as transgendered go through a social process of changing their gender, while persons who identify as intersex have biological traits that conflict with the prevailing sex/gender system. One phrase relates to biological sex, while the other refers to social gender. Intersex persons question our binary concepts of biological sex, much as transgender people challenge our binary ideas of gender. The basic idea that there is an inherent sex to a person has been contested by gender theorists like Judith Butler and Gayle Rubin, who claim that sex is also socially produced. Is sex made up of genitalia, as shown by many definitions of sex throughout legal and medical history? Is it only a matter of genetics? a synthesis of the two? The word sex has been variously defined throughout American legal history, and diverse societal organisations, including courts, have not arrived to a uniform or definitive definition of sex. In this approach, the biological labels male and female may be seen as social constructs that support the binary division of genders.

## Sexualities

Heterosexuality is no more or no less natural than, say, homosexual sexuality or bisexuality, as was covered in the section on social construction. As was seen, sexologists and medical professionals in particular defined heterosexuality and its limitations. Situated, cultural norms define what is considered natural. Defining sexual desire and relations between women and men as acceptable and normal means defining all sexual desire and expression outside that parameter as deviant. This definition of the parameters of heterosexuality is an expression of power that constructs which types of sexuality are considered normal and which types are considered deviant. Think of some words for women who have many sexual partners and then do the same for men who have many sexual partners; the results will be quite different. However, even within sexual relations between men and women, gendered cultural norms associated with heterosexuality dictate what is normal or deviant. Therefore, power relationships along the lines of gender and sexual orientation are visible within the realm of sexuality.

According to Adrienne Rich, heterosexuality is compulsory, which means that in our society, everyone is believed to be heterosexual and that there are several statutory and informal laws that support heterosexuality and discourage sexual diversity. Inequality in the lives of sexual minorities is mostly perpetuated by mandatory heterosexuality. Just have a look at the rules; in certain areas, like Indiana, joint adoptions for homosexual men and lesbians are prohibited. Due to homophobia, which is the fear, hate, or prejudice towards homosexual people, gay men and lesbians have lost custody cases involving children. Few and often unfavourable stereotypes are used to represent gay men and lesbians in the media. Despite the fact that there are statistically quite likely to be many out homosexual players in the main three men's professional sportsbasketball, baseball, and footballthere aren't many of them. Many religious organisations openly discriminate and reject homosexual men and lesbians.

Furthermore, heteronormativity shapes the commonplace, accepted ways that heterosexuality is favoured and normalised. Sociologist Karen Martin, for instance, looked at what parents say to their kids about sexuality and reproduction. She discovered that even when the kids were between the ages of three and five, parents frequently assumed that they were heterosexual, told them they would get married, and interpreted cross-gender interactions as signs of heterosexuality. The concept of mandatory monogamy, whereby exclusive romantic and sexual partnerships as well as marriage are expected and valued above other types of relationships, is another component of normative sexuality that is present in this kind of socialisation. Because of this, heteronormativity instills in us the notion that there are only two genders and that we should seek and be partners with one person of the other gender, whom we will eventually marry. Sexuality is not binary nor fixed, much like gender. In addition to being straight and homosexual, individuals may also identify as bisexual, pansexual, omnisexual, queer, and heteroflexible, to name a few. Additionally, during a person's lifespan, sexual identity, sexual interactions, and sexual desire may all change. There are more than two genders, which means there are more than two distinct types of persons who people may be attracted to and have sexual relations with simultaneously[7], [8].

The idea that not all transgender persons are sexually queer is another prevalent misunderstanding. The LGBT abbreviation, which includes transgender persons alongside lesbians, gay men, and bisexuals, may be the source of this misconception. A trans guy who used to identify as a lesbian could still be drawn to females and self-identify as straight or queer.

Another trans guy could be homosexual or queer and be drawn to other males. This diversity indicates that the binary paradigm, which is prominent in culture, falls short of correctly capturing the enormous range of sexual and gender lived experiences.

### **Masculinities**

The notion of many masculinities also challenges the gender binary. Connell contends that there are several forms of masculinity and that what is deemed masculine varies depending on one's race, class, ethnicity, sexual orientation, and gender. For instance, a person's understanding of computers may be seen as masculine since it might help them earn money and amass riches, and wealth is something we associate with men. But only for certain guys does computer expertise equate to masculinity. While a middle-class Asian-American guy could get more masculinity points for his high-paying computer profession, the same might not be true for a working-class white man, whose white-collar desk job might be perceived as a weakness to his masculinity by other working-class men. Age-related differences in expectations for masculinity imply that being a man at 19 is significantly different from being a man at 70. As a result, there are intersections between masculinity and other identities, and expectations shift as a result. Judith Halberstam utilised the idea of feminine masculinity to explain the many ways men who identify as female might be masculine. By connecting maleness and power, as defined by Halberstam, female-assigned persons may access masculinity via drag-king performances, butch identification, or trans identity. Men may achieve masculinity via interactions rather than being born with it, which is shown by separating masculinity from male-assigned bodies [9], [10].

### **Race**

Racism was the first thing that concepts of race existed. The concept of fundamental racial distinctions, on the other hand, is the result of inequity and oppression. There is a binary concept of race in the United States, with Black and White being the only two options. Not that there are only two races acknowledged; just that these are the artificial oppositional poles of race. What are race do we mean? What does Abby Ferber mean by race in the passage above? These ideas are not only held by self-proclaimed racists, but are woven into the fabric of American society in social institutions. In biologized constructions of race, race determines intelligence, sexuality, strength, motivation, and culture, among other things. For instance, if a person had any African ancestry before the 20th century, they were regarded as legally Black. The so-called one-drop rule said that you were deemed Black if you even had a trace of African blood. White blood was treated differently; rather, its purity was what made it white. These concepts are still there today. Those who have one Black parent and one White parent are often classified as Black, whereas those who have one Asian parent and one White parent are typically classified as Asian.

Science has been used to support a number of cultural notions about racial difference. Early 19th-century White scientists used biological differences to prove Black racial inferiority. The studies that claimed African American skulls had less cranial capacity, smaller brains, and hence poorer intellect were the most famous. Later research disproved both the notion that scientists' methods were biased and the notion that IQ was not genuinely predicted by brain size. Scientific racism refers to the practise of using science to try to validate concepts of racial superiority and inferiority. Because Black is a regained and empowered identity, we capitalise it here rather than White. Recent studies of Black Americans show signs of scientific racism. Ideas about African Americans from the time of chattel slavery in the Americas often influence these studies and the applications they make.

For example, the Moynihan Report, also referred to as *The Negro Family: A Case for National Action*, was a notorious report that asserted that the non-nuclear family structure present in poor and working-class African American populations, characterised by an absent father and matriarchal mother, would impede the entire race's progress in terms of economic and social development. Politicians seized on this research, playing on prejudices from the time of African-American slavery that justified treating Black Americans as less than human, even if the real reasoning was far more complicated, and proposed an essentialist argument regarding race and the culture of poverty. One of these stereotypes is that Black men and women are hypersexual; Patricia Hill Collins has done the best job of dissecting these images in her work on controlling images of African Americans, which includes images like the Jezebel image of Black women and the Buck image of Black men that were previously discussed. Slave owners had a financial stake in the procreation of slaves because offspring of bondwomen would also become their property. As a result, they institutionalised rape practises against slave women in order to induce pregnancies rather than waiting for women to fall pregnant naturally.

Since slaves were considered to be property, raping one was not a crime and was not considered to be rape. African American slaves, however, had to be portrayed as fundamentally different in other ways to justify captivity since so many people recognised them as human beings. This was accomplished by the idea that Black people are naturally more sexual and that Black women are consequently unrapable. In order to justify breaking apart slave families and using Black men to impregnate Black women, Black men were portrayed as hypersexual Bucks who were uninterested in monogamy and family. The Moynihan Report's fundamental assumption that Black families are made up of domineering mothers and uncaring fathers, and that if they could only create more stable nuclear families and resemble the white middle class, they would be freed from poverty reflect the notions of natural difference found in the ideology that justified American slavery. In order to assert fundamental biological differences in the areas of gender, sexuality, and family or racial culture, this line of argument ignores the structural causes of racialized economic inequality, particularly the undue impoverishment of Blacks and the undue enrichment of whites during slavery and decades of unequal laws and blocked access to employment opportunities.

The Black/White binary is the most prevalent racial binary system in use in the American context, however there are other racial categories recognised inside the country. When we look at the instance of the Irish immigrant from the 19th century, we can see that this Black/White dichotomy is real and that it is socially produced. Irish immigrants were blackened in the popular press and the white, Anglo-Saxon imagination when they first arrived. Irish immigrants were shown in cartoons as having dark complexion, thick brows, and exaggerated facial characteristics like large lips. They were portrayed as being lazy, stupid, and inebriated non-white others for many years.

Irish immigrants, along with their offspring and grandchildren, gradually were classified as white through engaging in white supremacist racial practises and ideas and purposefully avoiding labour conflicts with Black Americans and other non-whites. The Irish in America eventually became white in this fashion. Following World War II, Jewish immigrants from other European nations underwent a similar path as did Italian-Americans. Similar to Irish Americans, both populations become white after being seen as non-white at first. These instances highlight the social construction of race and the persistence of this categorization system in modern society.



Are Asian-Americans, the so-called model minority, the next group to be assimilated into the white category, or will they still be seen as external threats? Time will only tell.

### **Class**

In the US environment, socioeconomic class distinctions are especially concealed. The American Dream worldview may contribute to some of this explanation. Anyone who works hard enough will achieve, according to a common misconception about meritocracy, and those who don't succeed must not have worked hard enough. This line of thinking is flawed because it cannot account for the following two situations: What about those who put in little to no effort yet nonetheless succeed? What about those that put forth a lot of effort yet fail? Of course, how we define success has some bearing on this. The American Dream is defined as having a fantastic career, earning a lot of money, and having a home, vehicle, and all the newest technology. These are indicators of tangible, or financial, riches. In addition to personal income, wealth is also represented by various assets, not all of which are acquired by hard labour alone but rather via inheritance, marriage, or good fortune. Although the rich/poor dichotomy is often used to describe class, the majority of Americans identify as middle-class.

The term middle class implies a political worldview more than just how much money individuals have in their bank accounts. Politicians often use the word middle-class to represent average, tax-paying, and morally upstanding citizens and fight for their collective voice and prosperity when they seek for office or debate legislation. The middle class is not metaphorically contrasted to the exceedingly affluent, but rather to the impoverished. Since they are not the deviant, tax-swindling, or immoral, impoverished people, it is implied when people refer to the middle class. Although it may sound harsh, this is really how the impoverished are portrayed in the news. Welfare recipients are frequently anonymous but framed as undeserving of assistance because they are thought to be abusing the system, dependent on drugs or alcohol, or responsible for their own poverty. If this still seems far-fetched, simply substitute the poor with welfare recipients. The middle-class everyman who often appear in political speeches and radio rants have their implicit equivalents in welfare users. So, the middle class and the impoverished have been created as the two extremes of socioeconomic class in the United States.

As the welfare queen stereotype conjures up ideas of impoverished, black, sexually promiscuous women, in contrast to the reality that white women as a group are the greatest welfare beneficiaries, these class-based classifications also carry racial and sexual connotations. In their discussion of how these impoverished stereotypes are incorporated into American poverty programmes, Fred Block and colleagues. For instance, the Personal Responsibility/Work Opportunities Reconciliation Act, signed into law by President Bill Clinton in 1996, substantially revised previous US welfare law.

This law mandates that beneficiaries who are able-bodied work or pursue job training for low-skill employment while receiving benefits, and it caps the amount of time a person may receive welfare in a lifetime at 60 months, or 5 years. Recent immigrants are prohibited from receiving assistance for the first five years of their legal residency under PRWORA, and illegal immigrants are never eligible to collect welfare payments.

Based on the presumption that welfare beneficiaries are ultimately defrauding the American public and trying to get a free ride, these limits have been put in place. Despite these modifications, the majority of individuals still think that receiving government help entitles them



to lifelong financial support. It is possible to achieve media scorn for welfare claimants by not humanising the experience of poverty. People who live in poverty often have to make difficult decisions. For example, working additional hours or taking a job that pays a little bit more may prevent one from passing the means test for Medicaid or food stamps.

The cost of living has increased significantly over the last several decades but working-class salaries have not increased at a comparable rate, forcing the poor to choose between paying their rent and other expenses like food and utilities. Class concerns, however, go beyond just focusing on disparities in wealth. The late sociologist Pierre Bourdieu used the term cultural capital to discuss non-financial class disparities including gastronomic and musical preferences and high-brow knowledge.

Even when a person who was formerly impoverished experiences economic mobility and moves into the middle class, according to Bourdieu, there are still signs of her previous position in the way she conducts herself and the things she knows. In well-known films, there are many of instances of this. When someone rises from poverty to wealth, they often use the incorrect dinnerware, mispronounce words, can't differentiate a Chardonnay from a Merlot, and spend money in ostentatious ways.

As a result, a person might have high cultural capital while being poor or low cultural capital while being rich. For instance, Nomi Malone, the lead character in the well-known film *Showgirls*, makes the rapid transition from being homeless and jobless to becoming a well-paid showgirl in Las Vegas. She boasts about purchasing an expensive Versace garment along the way. She unfortunately mispronounces the brand, exposing her lack of cultural capital and, thus, her prior position as a poor person, and is humiliated by some quite nasty spectators. In conclusion, the idea of cultural capital draws attention to the ways that social class is not simply about money and wealth, but also how social classes create class cultures [11], [12].

### **Options vs Binary Systems**

With the help of all these examples, we seek to demonstrate how binary approaches to understanding human differences fall short when it comes to comprehending the nuanced nature of cultural diversity. Binary thinking presupposes that there are only two categories of identity, such as gender, race, and class, and that these two categories are completely at odds with one another. Oppositional, binary thinking works strategically such that the dominant groups in society are associated with more valued traits, while the subordinate groups, defined as their opposites, are always associated with less valued traits. This is similar to how men are defined as not women in a binary system, straight people are defined as not gay, white people are defined as not Black, and middle-class people are defined as not poor.

As a result, in a binary system, the poles define one another and are only coherent in the presence of their complementary poles. Only in relation to femininity can masculinity be meaningful. Identity and life are complicated, multifaceted concepts in reality. One is that as matrices of difference, all categories of identity are more fully represented and comprehended. More than that, we all experience numerous facets of identity at once and in a way that is mutually constitutive. The way we perceive gender is constantly influenced by our racial, socioeconomic, and other characteristics. The way we perceive race depends on our gender, class, and other factors. Because of this, knowing identity from an intersectional perspective enables us to have a more nuanced view of social reality. The social world is complex, and rather than reducing

human difference to simple binaries, we must embrace the world as it is and acknowledge the complexity. Each of our social locations is impacted by the intersection of several facets of identity in a way that should cause us to pause when we hear statements like all men are, all Latinas are, or all lesbians are.

## CONCLUSION

The complexity of human identity and experiences may not be well captured by standard binary concepts; therefore, the research explores the function of language and representation in maintaining binary systems. The chapter examines how non-binary, genderqueer, and other gender identities are emerging and challenging the gender binary, creating new avenues for recognition and self-expression. The transformational effect of questioning binary systems and representations of difference in creating a more inclusive and equitable society is highlighted by this chapter's conclusion. Individuals and communities can work to dismantle oppressive structures and foster an environment that celebrates diversity and embraces the depth of the human experience by critically examining the limitations of rigid categorizations, embracing intersectionality, and acknowledging the fluidity of identities. This chapter is a call to action to continue having these important conversations in the academic community and in public debate in order to build a more sympathetic and caring society.

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## CHAPTER 14

### **Institutions, Culture and Structures: Understanding Gender Dynamics**

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#### **ABSTRACT:**

The complex interactions between institutions, culture, and structures that influence the dynamics of gender and sexuality in countries are explored in this chapter. It explores how different social structures, cultural norms, and structural systems affect and shape ideas about gender identity and sexual orientation. The research intends to shed light on the processes that maintain gender and sexuality inequality and argue for transformational change towards more inclusive and equitable settings by examining these intricate linkages. The introduction starts out by looking at the institutions that shape gender and sexuality norms and expectations, including family, education, the media, religion, and the legal system. These organisations often promote established gender roles, stereotypes, and heteronormative narratives, further marginalizing those who don't fit the mould. The chapter highlights the need of challenging and transforming toxic beliefs by critically examining these organisations. Additionally, this chapter explores the role that culture plays in the construction of gender and sexuality. It draws attention to the ways in which cultural customs, rites, and representations uphold certain standards and notions of sexual orientation and gender roles. Cultural norms may either be liberating, allowing for the manifestation of a variety of identities, or constrictive, suppressing the expression of gender and sexuality on an individual basis. This chapter emphasises the possibility for cultural transformation to foster more inclusion and acceptance by acknowledging the influence of culture.

#### **KEYWORDS:**

Culture, Institutions, Knowledge, Medical, Structures.

#### **INTRODUCTION**

This often see medicine and medical knowledge as unbiased, impartial, and essential to our well-being, the well-being of society, and both. There is no denying that medicine has developed cures, vaccinations, and technology that can save lives. Though it exists independently of the cultures and communities in which it was developed, medicine is not an impartial field. The medical model, which makes a variety of assumptions, is the foundation of medicine. It begins by supposing that the body is regulated by rules and procedures that are apart from culture, social structure, and institutions. Second, it makes the assumption that only medical professionals are capable of determining the health or pathology of the body and administering the appropriate treatments. In conclusion, the medical model is a medical-biological concept of the body that frames the body's systems, diseases, or health indicators as being independent of culture, ideology, economics, and the state. This perspective of the body has been criticised by feminist and critical theorists, who have shown how both physicians and medicine medicalize bodies in specific ways in accordance with gender ideas. Feminists have also emphasised that we need to

focus on how racial, gender, and economic disparities affect the health outcomes of various social groups. The process through which human issues become defined and treated as medical problems, usually in terms of illness and disorders and are then controlled and treated by medical experts is known as medicalization, according to medical sociologist Peter Conrad. Governmental organisations that advocate for therapy, like the US Centres for Disease Control and Prevention, create medical issues that are then enshrined in policy[1], [2]. For instance, the most current version of the Diagnostic and Statistical Manual of Mental Disorders, the DSM-5, has two new diagnostic categories for the sensation of low sexual desire, one for males and one for women. These categories portray low sexual desire as a problem and define the experience as fundamentally different for women than for males, despite the fact that low sexual desire does not pose a danger to a person's health.

Members of the work groups that developed the diagnostic categories for the DSM-5 had a variety of competing interests, including connections to pharmaceutical firms. This diagnostic category came when pharmaceutical firm Urometrics created and sold EROS, the first medicine to treat female sexual dysfunction. Female sexual dysfunction is described by the Food and Drug Administration as having decreased sexual desire, decreased sexual arousal, pain during intercourse, or inability to climax. A specific social context led to the pathologization of decreased sexual arousal. Pfizer's \$1.3 billion Viagra profit windfall in 2000 encouraged pharmaceutical companies to create a comparable product to market to women, and a diagnostic category then developed to support Viagra prescriptions and sales.

This is an illustration of how heterosexual women's sexuality is medicalized to suit purposes other than their own health and enjoyment. For decades, feminists have criticised the ways in which women's sexual wants and desires are often neglected in favors of men's needs and desires, identifying the issue as being caused by women's tiredness from both paid and unpaid chores as well as by unresponsive male partners. Contrarily, urometric and the medical professionals that created EROS see the issue as being caused by a female body malfunction. Instead of addressing the more fundamental social and cultural factors that may be preventing heterosexual women from experiencing sexual fulfilment, EROS provides a commercialized, FDA-approved, medically prescribed therapy for a medically defined bodily dysfunction. In a similar vein, gender nonconformity and transgender identification have been medicalized for many years. Gender Dysphoria is the current DSM-5 diagnostic category.

One component of bio-power is medicalization. According to philosopher Michel Foucault, bio-power describes the methods used by contemporary nations to control their citizens via the use of military technology. Populations in contemporary, complex societies, according to Foucault, will not accept totalitarian state power abuses. Modern governments must thus find less obvious methods to manage their populaces, such as gathering information on their people's health, reproductive potential, and sexual behaviours for the sake of governmental regulation and intervention. For instance, historian Laura Briggs demonstrates how during the colonial American occupation of Puerto Rico in the early 20th century, public health officials attempted to implement eugenics policies to restrict Puerto Rican women's ability to reproduce by treating the venereal disease problem as a problem of overpopulation and sexual immorality. Foucault made the crucial claim that contemporary governments' data-gathering practises joined with medical knowledge to establish new health standards that people internalize. Therefore, the goal of bio-power is to help individuals manage their own behaviour in accordance with standards that the government and the medical community have established[3], [4].

## DISCUSSION

The health and sexuality of women have not all been medicalized in the same ways or to the same extents, as we have argued in the past. Poor or working-class white women and women of colour, together with persons with disabilities, are the focus of public health campaigns to control their sexuality and reproduction due to racial and socioeconomic disparities and inequities. As shown by the usage of biopower by the United States in Puerto Rico above. In that case, the sexuality and reproduction of working-class and poor Puerto Rican women were medicalized in a manner that affluent Puerto Rican and white women's sexuality and reproduction were not. Despite starting in the late 19th century, the eugenics movement has had a significant global influence. The goal of eugenics, a medical/scientific concept and social movement, is to eradicate certain racial or ethnic groups via sterilization or genocide by blaming their genetic make-up or inheritance for social and psychological issues. Eugenics is the most logical extension of biological determinism and biopower. Eugenicists think that selective breeding of those groups nondisabled, heterosexual, white, middle-class, Northern and Western European that they see as inherently superior is a reasonable, scientific way to solve societal issues.

The Holocaust in Nazi Germany is the most glaring and well-known instance of eugenics in action, yet many people are unaware that eugenics-based sterilization was mandated by law in the United States throughout a significant portion of the 20th century. The first mandatory sterilization statute based on eugenics was approved in Indiana in 1907, and 30 other states quickly followed. The outcomes of sterilization in California were hailed in a study, which the Nazi regime frequently quoted as proof that broad sterilization programs are practicable and humane. Over 64,000 people were forcibly sterilized in the United States between 1907 and 1963 as a result of eugenics laws. In the early part of the 20th century, the United States' immigration policy began to reflect the eugenics movement. Projects involving eugenics are still active today. Many nations still pressure or impose sterilization on women and girls, particularly handicapped women and girls. As late as 2010, women in Californian jails were still being forcefully sterilized. Additionally, as of April 2017, 20 European nations demanded sterilization before transgender persons could get legal gender recognition.

Along with overt genocidal schemes, social interactions in unequal societies increasingly put marginalized groups at risk for environmental and health dangers at a greater rate than privileged ones, which has an impact on pregnancy and health outcomes. For instance, according to the National Association of City and County Health Officials, a person's risk of sickness, cancer, infant mortality, and diabetes decreases with income in the United States. Richard David and James Collins, two doctors who specialised in preterm birth, discovered that African Americans who lived in middle- or upper-class households did not have the same reduced risks for premature delivery as their white counterparts. By comparing the infants of African American women, white women, and African women, they sought to determine if there was a premature birth gene unique to African Americans. However, African American women were still 3 times more likely to give birth prematurely than either of these groups, suggesting that there is no genetic basis for the differences in pregnancy outcomes between white and black women. They discovered that African women and white American women had similar pregnancy outcomes. Therefore, David and Collins contend that African Americans regardless of socioeconomic class experience high levels of stress as a result of their ongoing encounters with racism in the United States, which they believe explains the pregnancy difference. For middle-class or upper-



class African Americans, particularly African American women, the pressure to constantly be alert and perform at the highest level in order to dispel racist stereotypes leads to an ongoing buildup of stress, which increases the risk of adverse health effects. Such results imply that crossing racial, social class, and gender disparities have substantial effects on the health outcomes of various socially positioned groups[5], [6].

The reproductive justice movement's activity is driven by the realization that societal injustices have a negative impact on women's health. Inequities based on race, class, and gender are highlighted along with how these inequities limit women's ability to exercise personal control over their lives in a reproductive justice framework for understanding the politics of health and reproduction. It emphasises the socioeconomic and cultural prerequisites, such as employment, cheap housing, access to healthcare, and lives free from abuse, for poor women and women of colour to be able to make decisions. The conflicts in feminist movements between white middle-class feminist activists and activists of colour gave rise to the reproductive justice movement. White, middle-class feminists used the language of choice to frame their arguments in favor of abortion. This individualizing approach to discussing reproductive politics ignored the ways that poverty, race, laws, and medical authorities-imposed control over many women's reproductive lives.

The growing conservative movement of the mid to late 1970s was successful in passing the Hyde Amendment after *Roe v. Wade* was decided in 1973. The Hyde Amendment forbids the financing of abortions using government monies, particularly Medicaid. Poor women, who are disproportionately women of colour, are disproportionately impacted by this amendment. The National Organisation of Women may have organised a protest to oppose or overturn the Hyde Amendment, but they did not. As a result, feminists of colour began to criticise the framework for reproductive rights, claiming that it only takes into account the viewpoints and experiences of white, middle-class feminists and ignores the larger racial and social injustices that restrict women's ability to actually make decisions about having children and starting families. By arguing that social inequalities restrict choice and expose differently situated female-bodied people to illness and disease depending on their social location within multiple axes of identity, the reproductive justice movement challenges the individualizing and depoliticizing tendencies of the medicalization of women's bodies. As a result, it demonstrates how biology and genetics are just a small part of what causes health and sickness.

### **The Prison System, Law, and the State**

Students are often taught in high school civics and social science classrooms that the United States is a democratic nation-state because the government is made up of three independent institutions: the Executive, Judicial, and Legislative branches, which function as checks and balances on one another. It is explained to students that anybody may run for office and that the outcomes of elections impact the course of the country. However, as economist Joseph Stiglitz notes, one may want to reevaluate this popular narrative in light of the reality that the majority of US senators, members of the House of Representatives, and policymakers in the executive branch come from the richest 1% of society.

We see the state with more skepticism than the civics texts for high school. We define the State as a collection of laws, regulations, executive agencies, and prison- and military-industrial complexes. We also notice that the distinction between civil society and the state is not always clear; individuals and groups of individuals often engage in extrajudicial activities that

strengthen the authority of the state even if they are not formally state actors. This concept provides a broader understanding of how politics, civil society, and the global economy interact and often serve the interests of wealthy national and international elites as well as multinational businesses. In the pages that follow, we point out the key roles that the state in all of its manifestations plays in upholding and perpetuating inequality.

Through laws and regulations that have an impact on a wide range of institutions, including education, social welfare programs, health and medicine, and the family, the state significantly contributes to the reinforcement of gender stratification and racism. The War on Drugs that the Reagan Administration launched in the 1980s and the prison system are two prime examples of this. At the end of 2015, the United States had approximately 2.1 million prisoners, according to the Bureau of Justice Statistics. Furthermore, approximately 6.7 million people were either in jail or prison, on probation, or parole. This indicates that the US criminal court system had some kind of monitoring on around 2.7% of the adult population. In fact, compared to all other nations on earth, the United States has the greatest number of prisoners. The War on Drugs, which decriminalized the use and sale of drugs, is primarily to blame for these rates of imprisonment. The implementation of mandatory minimum sentencing legislation, which send non-violent drug offenders to jail rather than enrolling them in treatment programmes, was a crucial component of the War on Drugs.

People of colour have been disproportionately affected by the War on Drugs. Inmates make up 70% of the prison population in the US, which is more than the nearly 23% of non-white people in US society as of the 2015 US Census. Therefore, the US criminal justice system greatly overrepresents non-white convicts. Women of colour have been detained at rates much higher than white women, while using drugs at rates that are equivalent to or lower than white women, even though the overall rate of imprisonment for drug-related offences among women has increased by 888% between 1986 and 1999. Furthermore, almost two-thirds of US women convicts had children under the age of 18 in 2007, according to Bureau of Justice data. These ladies mostly took care of their children and other family members before going to prison. Therefore, the effects of women being incarcerated on families, communities, and children are significant. Finally, prisoners often work in prisons for pay that is less than the minimum wage. Companies hire prisoners to work for them, making millions of dollars in profit. Therefore, by locking up millions of people, the unemployment rate is artificially lowered, and a cheap labour pool is created, which profits private companies to the tune of millions of dollars [7], [8].

According to professor and feminist activist Angela Davis, we might think of the prison system and its connections to corporate production as the prison-industrial complex. According to the text *Are Prisons Obsolete?* In order to concentrate and regulate people designated as human surplus by the capitalist system, Davis contends that an increasing number of prisons were constructed in the 1980s. According to her, there is a link between the history of slavery, which included the enslavement of African Americans up until the 19th century, and the development of the prison-industrial complex, which aims to profit off of the Black, Latino, Native American, and poor bodies by criminalizing and managing them. In the US, the prison-industrial complex is a mostly invisible apparatus that marginalizes people of colour. Similar to this, Michelle Alexander claims in *The New Jim Crow* that mass imprisonment has established and perpetuated a racial caste system, emphasising how it impairs people and communities via stigma, employment discrimination, and the loss of the right to vote in many states.

Similar to this, sociologist Loic Wacquant contends that the criminal justice system's use of mass imprisonment serves as an increasingly potent form of racial control. How far has the US really advanced in terms of racial and gender equality in light of the prison-industrial system and its racist and gendered effects? Here, we emphasise the distinction between *de jure* regulations and *de facto* facts. *De jure* refers to already-enacted laws, while *de facto* relates to actual situations. *De facto* racial disparity still continues even though the Civil Rights Act of 1964 made it permissible for *de jure* segregation, or segregation that is enforced by law, to stop in areas like education, voting, and the job. Even while overt racial discrimination is prohibited, state programmes like the War on Drugs continue to disproportionately lock up people of colour, as is evident from imprisonment statistics.

### **Case Study of Intersecting Institutions: The Fight to End Gender-Based and Violence Against Women**

We have shown some examples of how social institutions interact with one another and support one another so far. The fight to stop violence against women serves as an illustration in this part of the ways that the family, the media, the legal system, the medical community, and the prison system encourage gendered violence and violence against women. The term gendered violence draws attention to how violence affects people in general within the context of a society that is characterised by a sex/gender/sexuality system that denigrates femininity, sexual minorities, and gender minorities, as well as how transgender people, gay men, and women frequently experience violence. The systemic and systematic aspect of violence is shown by Hussein Balhan's definition of violence: Violence is neither an isolated physical act or a discrete random incident. Violence occurs not only between individuals but also between groups and societies. According to this definition, any relation, process, or condition imposed by someone that harms the health and well-being of others is violent.

As Kirk and Okazawa-Rey point out, this definition not only includes sexual assault and domestic violence between individuals but also includes mafia violence. Importantly, Bulhan uses the term survivors rather than victims to describe those who have experienced violence; this distinction is important because victims maintain and reinforces the subordinate position of those who have experienced violence, whereas survivors' emphasis the agency and self-determination of those who have experienced violence. Therefore, we want to emphasis not only that sexual and intimate partner abuse is systemic but also that men and women have banded together to fight against it and that victims of sexual and domestic violence as well as their survivors have agency and use it. Although our society views the family and home as a haven in a heartless world, these environments are often the scene of both mental and physical abuse. As we noted in the section on families, the idea of the typical family as a privatized space, together with the gender roles we imply with the SNAF, is an ideological construct that often conceals inequities that occur inside families.

Intimate partner violence encompasses current and former spouses, girlfriends, and boyfriends and is defined as emotional and physical abuse committed by one partner against another. Both heterosexual and homosexual partnerships experience intimate partner violence, although in heterosexual relationships, the gender of the abuse is far more obvious. According to the US Department of Justice, 37% of women who went to the hospital for injuries received from others were hurt by male intimate partners. In addition, study participants who were high school females claimed that one in five of them had experienced physical or sexual abuse. The bulk of

these occurrences happened many times at homes. It is important to highlight that only those who actually sought medical attention and/or reported an injury from a male intimate partner are included in these data. Because of this, the real number of women hurt by intimate partners may be drastically understated by this figure. Prior to the 1970s, most states in the United States did not have laws against marital rape or rape between spouses. This was a holdover from coverture rules, which persisted up until the 19th century and considered women to be the husbands' property with no legal standing. Thus, the legal development of marriage has contributed to the idea that marital rape is somehow less severe and destructive than rape committed by an outsider. Women's dependency on partners for survival, even when these partners are violent, is further reinforced by the devaluation of women's labour and the fact that they are typically paid 77% less than men for the same job[9], [10].

Women in communities of colour may be less likely to disclose sexual or intimate partner assault due to the history of institutionalized racism among law enforcement and police forces. Because they do not want to subject their partners to the criminal justice system, which has disproportionately imprisoned people of colour, as was discussed in the preceding section on the state, jail, and law, women may not disclose abuse from partners who are people of colour. In addition, many women of colour may be reluctant to contact the police in situations of abuse due to prior encounters with abusive police personnel, police brutality, or police apathy to cries for assistance. Similar to this, women who are illegal immigrants who reside in the United States may be afraid to report sexual or intimate relationship abuse for fear of being deported by Immigration and Customs Enforcement or being sent back with their spouse.

A number of syndromes have been developed by psychologists, psychiatrists, and other medical experts to characterise the impact of violence against women. These approaches to violence against women tend to individualize, depoliticize, and medicalize gendered violence and frequently pathologize the survivor rather than identifying the cultural conditions that compel abusers to abuse others, despite the fact that they have raised awareness of the issue and the need for treatment programmes. According to the Battered Women's Syndrome, which was proposed by psychologist Lenore Walker, a victim of abuse learns helplessness and keeps going back to her abuser despite his repeated pledges to stop hurting her. Rape Trauma Syndrome is another syndrome that describes the irrational actions taken by women who have been raped, including failing to report the rape for days or even months, forgetting specifics of the assault, seeming too composed, and expressing rage at how the police, medical personnel, or legal system treated them. Both of these accounts of the effects of violence have been utilised effectively in court to convict the offenders, but they also portray survivors as helpless, damaged victims who respond in an irrational manner.

In fact, sexual assault victims are active agents with the capacity to organise and take part in anti-violence activism and organisations, as well as to hold their assailant accountable for their actions, according to activists who fight gendered violence and violence against women. This lesson has made an effort to demonstrate how institutions are active participants in our socialisation, loaded with ideology and power, rather than being neutral, apolitical aspects of our existence. Inequalities are created and perpetuated by them. Institutions also often cross over and support one another, as was shown in the section on gendered violence that came before it. Even while we may conceive of institutions as being untouched by culture and society, they are really very social creatures. They were produced using the same cultural and historical thinking systems throughout the same times in which they both exist. The views of people in authority

inside institutions, however, are often the prevailing ideas of an age owing to the excessive influence of institutions and individuals at its tops, such as physicians, scientists, policymakers, specialists, etc. In this sense, institutions have an ideological aspect; they are influenced by society as a whole as well as by a specific cultural and historical era that produced them.

### **The Group**

Families may take many different shapes both here in the United States and throughout the globe. We become aware of how elusive the notion of family is when we attempt to define it. Does family just include people who are connected by blood? Stepparents and adopted kids are not considered to be a person's family under this definition. Additionally, it disavows the existence of fictive kin, or non-blood relatives who are regarded as family. Does family necessarily imply a nuclear family, as it is often assumed to mean in modern-day America? Extended family members including uncles, aunts, grandparents, cousins, nephews, and nieces are not included in this. Additionally, it does not include couples without children, single parents, or those who are not married. Or does the word family refer to a collective home marked by mutual economic support? This definition would exclude those who consider one another to be family but are unable to or choose not to reside in the same household, frequently due to financial constraints such as parents from South or Central America who leave their home countries in order to work in the United States and send money back to their families or because they are imprisoned.

All of these definitions would also dismiss the significance and reality of what Kath Weston refers to as chosen families, or the way queers, gay men, and lesbians who are shunned by their families of origin forge kinship bonds with close friends. According to the diversity of family structures throughout space and time, the idea of a universal family conceals historical change by establishing or perpetuating an ideology of the family that obscures the variety and reality of family experience in any location and time. What is the prevailing family philosophy in America? How did the family formation that underlies this prevailing worldview become the accepted concept of family? The mainstream ideology in the United States on what makes up a family acknowledges a particularly class- and race-specific sort of gendered family formation. The Standard North American Family is the name given to this kind of family unit. The SNAF is described by Smith as the idea that a family consists of a legally married couple who live together. The family household's economic foundation is provided by the adult man who works a paying job. Although the adult female may also have a job, she is primarily responsible for the spouse, home, and children.

Male and female adults who are parents of children who live in the home are also permitted. It is important to emphasize that the majority of American families do not conform to this conception of the family. Post-modern families are what Judith Stacey refers to as these vast and varied variations in how individuals arrange their families. The SNAF may be shown to be neither natural nor independent of politics and processes including racial, social class, and gender inequalities when seen in the context of history. About the SNAF's past, historians Nancy Cott and Stephanie Coontz have written. The separation of job and family, brought on by the advent of industrial capitalism, gave birth to the SNAF in the 19th century. The family was essentially an agricultural labour unit prior to an industrial economy centred on the production of goods in urban factories; there was no distinction between work and home. With the emergence of



industrial capitalism, the majority of family members in working-class families and families of colour, including women and children, worked in factories.

### CONCLUSION

This conclusion emphasizes how crucial it is to comprehend how institutions, society, and structures shape gender and sexuality dynamics. Recognising these factors' significance enables people and society to strive towards the destruction of oppressive structures and the creation of settings that celebrate and affirm a variety of gender and sexual identities. The chapter is a call to action for revolutionary change, promoting social, cultural, and structural changes that favors inclusion, equality, and respect for all people, regardless of gender or sexual orientation. Additionally, this chapter explores how these structures, cultures, and institutions affect other populations, such as women, transgender and queer people, and people of colour. It looks at the particular difficulties that marginalized groups confront as well as how intersecting identities affect the diverse range of gender and sexuality experiences.

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## CHAPTER 15

### Cultures and Media: Shaping Gender and Sexuality Perspectives

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#### ABSTRACT:

The tremendous impact of cultures and media on how people perceive, depict, and comprehend gender and sexuality is explored in this chapter. It critically investigates the ways in which societal expectations, customs, and media representations shape and perpetuate gender roles, sexual identities, and romantic relationships. The research seeks to shed light on the influence of cultures and media on society views regarding gender and sexuality and promotes more inclusive and empowering narratives by analysing these intricate relationships. The chapter starts out by exploring how cultures affect gender and sexuality relations. It emphasises how cultural norms and traditions influence how gender roles and expectations are socially constructed. In order to perpetuate stereotypes and the binary notion of gender identity, cultures often prescribe certain behaviours and features depending on gender. The chapter highlights the significance of resisting narrow cultural standards in order to provide room for a variety of gender and sexual expressions. The research also discusses how media use affects how people see themselves and their knowledge of gender and sexuality. People's opinions of what is normal or acceptable in terms of gender expression and sexual orientation might change as a result of media exposure, which can also have an impact on people's beliefs, attitudes, and behaviours. In order to counterbalance negative messages and promote more progressive views, the chapter emphasises the need of media literacy and awareness.

#### KEYWORDS:

Culture, Gender, Media, Institutions, Structures.

#### INTRODUCTION

The majority of middle-class, white families who had inherited money and property did not need all of their family members to work. With the income of the breadwinner father, they were able to purchase their houses, employ house workers, maids, and tutors, and send their kids to prestigious schools. Thus, the gendered division of labour that is often taken for granted as a natural aspect of family life where men serve as the family's breadwinners and women provide unpaid care for the home is a result of more recent economic changes that favoured middle-class, white families. The philosophies of distinct spheres and the worship of domesticity were created as a result of this artificial division between the publicly-oriented, working father and the privately-oriented, homemaker mother. According to the separate sphere's worldview, men and women are fundamentally different individuals who are best suited for various types of work. Homemaking was associated with femininity, whereas earning a living was associated with men. Similarly, the cult of domesticity was an ideology about white femininity that promoted the idea that white women were asexual, morally upright individuals who belonged in the home's private realm.

Importantly, this philosophy used all women as a standard for what it meant to be a woman. Because these women needed to work and earn money to maintain their families, this ideology had the consequence of systemically denying working-class white women and women of colour access to the term women. Additionally, at this time, white women who were married were considered the legal property of their husbands under coverture rules. Women's legal personhood was replaced by their husbands upon marriage. Any money women earned had to be given to their husbands, and they were not allowed to possess property or produce or sign any legal papers. White middle-class women were therefore routinely denied rights and personhood under coverture, while not having to labour in factories or the fields of plantations. Due to their subservience to their husbands and lack of legal personhood, white middle-class women were able to maintain a certain level of financial prosperity and a representational position as morally superior individuals. Women of colour and working-class white women had access to the public realm in a manner that white middle-class women did not, but they also had to work in occupations that paid badly, and as a result, they were seen as less than authentic women[1], [2].

Law and social policy in the current day support the SNAF's historical, dominating worldview. For instance, gay men and lesbians often use adoption or assisted reproductive technologies, such as in vitro fertilization or surrogacy, among other techniques, when having children. Gay men and lesbians who want to start families confront obstacles since legislation in most places presume that biological family connections take precedence over non-biological ones. The SNAF's traditional tenets are reflected in legislation, and in this instance, they conflict with the reality of social groupings who reject the SNAF's philosophy. Social programmes often presuppose that the SNAF is not only a better family structure but also that its development serves as a stand-in for measures to combat poverty. For instance, marriage and the nuclear family have been touted as poverty reduction strategies by both the George W. Bush and Barack Obama administrations. Poor families of colour have been the focus of these programmes in particular. In The Healthy Marriages Initiative of 2004, President Bush committed \$1.5 billion to initiatives promoting fatherhood, including counselling, mentoring, marriage education, improving relationship skills, parenting, and initiatives to promote economic stability.

These initiatives included public awareness campaigns, high school education on the value of marriage, and marriage mentoring programmes. Such policies place the burden for systemic classism and racism on the victims while ignoring the historical, structural causes of racialized poverty. The normative family model is built on a white middle-class paradigm, which most US families do not fit or necessarily desire to fit, as the SNAF's history demonstrates. So far, our focus has been on feminist theories and viewpoints that aim to comprehend how power structures shape difference, how socially constructed binary distinctions produce and reproduce inequality, and how the categories of race, class, gender, and sexual orientation intersect. We may now inquire about the locations of these processes. Through routine operations in institutions, how are they not only generated but also renewed? The family, the media, the legal system, the medical profession, and the jail system are just a few of the important institutions that we identify, contextualize, and examine in the section that follows. We demonstrate how various institutions interact and overlap in ways that both restrict and facilitate action using the fight to eradicate violence against women as a case study. A theoretical overview of institutions, culture, and structures is presented first.

We must examine the organisations in which we spend a significant portion of our life engaging with people if we are to provide answers to these issues. A social order or pattern that has

attained a certain state or property survival to relatively self-activating social processes is what is referred to as an institution. Institutions, then, are lasting, traditional elements of social life that influence human behaviour. Institutions including the family, marriage, the media, the legal system, education, the state, and the workplace are examples. These institutions may be considered to organise cognition and behaviour because they provide standards for behaviour, rules for interaction, and allocation of resources among groups. They also often depend on formal laws. We function inside institutions often within many institutions at once in practically every aspect of our daily lives without realising their impact. We may thus think of institutions as the main forces behind socialisation, particularly the family, schools, religious organisations, the media, and peer groups. These are the main socialisation factors since they influence us from the moment we are born. As we become older, we often work in the same institutions and pass down these expectations, conventions, and standards to younger generations [3], [4].

## DISCUSSION

Institutions are the main places where gendered, classed, racial, ableist, and sexualized inequities are reproduced. Everyone does not have equal access to the same institution's schools, hospitals, marriage, etc. because these institutions often reward individuals differently depending on factors such as gender, class, ethnicity, ability, and sexual orientation. Consider the town or city you grew up in, for instance. Different schools could have existed in various parts of the city, in communities whose residents belonged to various social classes and racial groups. It's possible that there were two schools, one in a neighborhood with a large white middle class population and the other in one with a large black working-class population. There could also be private schools with expensive fees. Schools situated in various neighborhoods will have varied levels of resources books, computers, the capacity to pay teachers and staff, etc. because schools in most states are supported depending on the tax base of the school district, they are in.

The advantage of a well-funded public school will accrue to kids who reside in middle-class school districts, while the disadvantage will accrue to students who reside in working-class school districts due to the latter's lower level of financing. While this is going on, kids who enroll in the elite private school will probably already be in a position of economic advantage and will gain even more from being in an environment where other students from similar backgrounds and aspirations are present.

While kids in public schools are less likely to be enrolled in college prep programmes, restricting their chances to get into college, these students will most likely benefit from a curriculum of college ready subjects. Due to the same racial and economic disparities that restricted entrance to the middle-class, mostly white neighborhood school, those privileged kids will have a better chance of attending college and retaining their position as privileged students. In this sense, institutions perpetuate the benefits of race and class.

Institutions both influence and are influenced by culture. A group of people's symbols, beliefs, practises, and interests make up its culture. Ideology permeates culture, which is best characterised as the concepts, attitudes, and values of the dominant culture. It's vital to remember that dominant culture does not refer to the social group with the most population. Typically, dominant culture refers to a tiny social group that wields disproportionately large amounts of authority. The relatively tiny white minority in South Africa under apartheid is an illustration of a dominating culture. More recently, the Occupy Movement has criticised the manner in which the 1% dominates American society and wields an excessive degree of authority and power. In

this definition, we combine Sewell's concept of culture with Kirk and Okazawa-Rey's definition of culture. Institutions in the mainstream often favor and honour the prevailing culture. According to the sociologist Pierre Bourdieu, institutions appreciate certain cultural expressions and favour individuals who possess them. Various social classes have various sorts of cultural capital, assets that may not necessarily be economically valuable but that aid in social mobility, as we saw in the last chapter. For instance, children who attend private schools or public schools in middle-class areas often have access to more extracurricular activities, language classes, and arts courses, skills, knowledge, and experiences that universities highly appreciate when making admissions choices. Schools in less affluent neighborhoods often have fewer of these choices. As a result, not everyone has an equal opportunity to choose the kinds of symbols, meanings, values, and practices that are prized by institutions. People who were born into wealth, who are white, who are men, who are able-bodied, and who identify as heterosexual are among the groups with greater access to mainstream institutions. They also frequently have access to the cultural capital that mainstream institutions value. Social structures are produced through the interplay of institutions and culture.

Social structures are made up of two components: institutions that allocate resources to stratified groups based on socially built ideas, principles, and categories, and socially constructed ideas, principles, and categories. In addition, they mould or frame practice, identity, and experience. Social structures are relational in that they stratify groups according to the categories that underpin those groupings, giving resources and benefits to those groups unequally on both a symbolic and a material level. The intangible benefits that privileged groups get are referred to as symbolic resources. An example would be the fact that employers often make the assumption that dads are more deserving of higher compensation than childless peers or working moms since they are more mature, responsible, and industrious. The sex, gender, and sexuality systems in this case serve as a framework through which employers, who serve as the arbiters of development inside institutions of labour, prioritize heterosexual parenting. As a result, married men with children are unfairly allocated financial resources and heterosexual masculinity continues to be symbolically elevated. Married women without children and single males are not accorded the same symbolic and monetary benefits. Structures restrict people's access to opportunities in this regard, including those for further education, employment, and social mobility [4], [5].

Although there may be a propensity to see structures as immutable, monolithic objects, our concept of structure does not operate under this presumption. According to our concept, social structures depend on socially produced categories, or categories that change through time and space. Furthermore, despite the fact that social structures may be said to structure experience and identity, people are not passive observers or gullible suckers, as history's record of labour struggles, battles for independence from former colonies, the civil rights movement, and feminist movements have demonstrated. Instead, people resist the institutions as well as the dominant cultural ideas and categories that have been used to oppress them. Even while socially created categories are often used to categorise groups of people, those same groups of people may utilise that identity as the foundation for an active movement, changing the identity's basic definitions in the process. For instance, in the late 1960s, Black and homosexual liberationists used the terms Black power and gay power to reclaim and reframe identities that had been denigrated by the dominant culture and numerous mainstream organisations. This history of resistance inside the core of overarching power institutions demonstrates that individuals have the freedom to

decide what to do and how to do it. In other words, even while mechanisms restrict possibilities and perpetuate inequality, groups of individuals who have been consistently refused access to societal institutions may apply pressure on those institutions and already have. As a result, structure and agency should be seen as two forces that continually interact and influence one another rather than as two forces that are diametrically opposed[6], [7].

## Media

Consider how much media you are exposed to in a single day: from television and movies to Internet browsing, reading books, newspapers and magazines, to music and music videos, video games and more. The vast bulk of this material is created by businesses and contains adverts. In the fourth quarter of 2015, the average American aged 18 to 34 spent two hours and 45 minutes per day watching live TV and one hour and 23 minutes using TV-connected devices, for a total of four hours and eight minutes using a TV set for any purpose, according to a Nielson Company report. The pervasiveness of media in culture raises many concerns, such as what consequences may result from such a massive quantity of exposure to media that is often laden with adverts. How do gendered, sexualized, class-based, able-bodied, and racist divisions and inequities become created or maintained in the media? What kind of connection does the media have with customers, and how do they engage with media?

Michael Kimmel, a media specialist and sociologist, contends that the media are a key institution of socialisation that not only reflects but also generates culture. A crucial area for the development of gendered and sexualized difference is media portrayal. Consider the Disney films you most likely saw as a youngster as an example. In these films, a dominant young man prince, a colonial ship captain, or a soldier who is romantically interested in a young woman both characters are always assumed to be heterosexual who initially rejects the young man's advances but ultimately falls in love with him and marries him is a common theme. These Disney films provide important lessons to kids about gender and sexuality, particularly the value of hegemonic masculinity and the importance of femininity. Hegemonic masculinity is a particular kind of culturally valued masculinity associated with heterosexuality, marriage, and patriarchal control in the home and workplace. Hegemonic masculinity maintains its privileged position by suppressing other, less powerful types of masculinity. Emphasised femininity, on the other hand, is defined as conforming to the normative image of femininity and is focused on advancing the interests of males.

What connection can be seen between Disney films and how people really conduct their lives? They may influence our gendered and sexualized identities in ways that we are unaware of since they are fictitious, do not need to be supported by reality, are so widespread in our society, and are introduced to us at such a young age. How often have you heard someone express they want a fairy tale wedding or seen a celebrity wedding described in the media as such? This is one illustration of the ways in which media perpetuates hegemonic ideologies the notions, perspectives, and standards of the prevailing culture with regard to gender and sexuality. Additionally, media portrayals of male and female beauty standards that are racially and gendered replicate normative norms. In order to create feminised bodies with qualities that are largely out of reach for the majority of people, representations of women in advertising, film, and magazines frequently rely on the objectification of women, which involves cutting apart their bodies with the camera frame and re-creating them through digital manipulation.



This is demonstrated in Jean Kilbourne's video series *Killing Us Softly*. Kilbourne demonstrates how the body types and facial characteristics of white women, who often have petite bodies and European facial features, are valued by advertising, whereas women of colour are frequently exoticized by being shown in nature locations and wearing clothes with animal prints that are meant to evoke a pre-civilizational past. The result is that women of colour are shown as uncivilized, animalistic beings, a tactic that has traditionally been utilised in political cartoons and representations of people of colour to justify their subordination as less than human. Additionally, the media presents the world from a male perspective and portrays women as sex objects. The male gaze, as described by Laura Mulvey, is therefore a heterosexual male gaze since this kind of framing encourages males' viewers to perceive women as objects and encourages women to consider themselves as objects of men's desire. These are only a few instances of how media portrayals of social groupings both reflect and build power imbalances among those groups.

The symbolic destruction of social groupings is another way the media reflect and concurrently establish power inequalities between social groups. Through mass media depictions that simultaneously support dominant ideologies and the privilege of dominant groups, social groupings who lack power in society are deemed nonexistent, criticised, or trivialized. This phenomenon is known as symbolic annihilation. For instance, as we stated before, there aren't many gay and lesbian, transgender, or handicapped characters in popular culture, and when they are, they're usually stereotypically depicted. The cisgender heterosexual male gaze frequently depicts trans women characters as plot devices or targets of ridicule for comedic effect. These characters are frequently portrayed as actually men who deceive men in order to trap them into having sex with them; these representations serve to justify and normalize depictions of disgust towards them and violence against them. In court instances, depictions of trans women as evil deceivers and pretenders of various types have been used to excuse those responsible for the murders of trans women [8], [9].

While Jean Kilbourne's observations show how beauty standards harm women and girls, her theory on how people interact with media assumes that people passively absorb all they see in advertising and other forms of electronic and print media. The issue is never whether or if the media do anything; rather, it is how the media and its users interact to produce the many meanings that result from our encounters with those media, according to Michael Kimmel. Consumers engage with, question, and sometimes reject the intended meanings of media; no advertising, movie, or other kind of media has an inherent, intended meaning that goes straight from the creator to the consumer. In this sense, the interaction between the media product and the users who are engaging with it shapes the meanings of the media. By producing their own movies, music, pamphlets, 'zines', and other kinds of cultural production, media consumers may further obfuscate the line between creator and consumer. As a result, despite the fact that media do often reflect prevailing ideologies and normative norms, media consumers from various perspectives are able to change and reject the intended meanings of media.

## CONCLUSION

This looks at how the media affects how people perceive gender and sexuality. Television, movies, advertisements, and social media are just a few examples of the mass media that play a big part in creating and distributing gender and sexuality portrayals. The way people are portrayed in the media may either reinforce negative stereotypes and objectification or act as a



platform for positive representation and emancipation. This urges a critical examination of media representations in order to counter false narratives and advance more inclusive and genuine representations. Cultures and media may help to create more welcoming and encouraging settings for all people by questioning conventional gender stereotypes and fostering varied and inclusive narratives. This conclusion emphasises the critical influence that cultures and the media have on how people perceive and depict gender and sexuality. It emphasises how powerful these cultural influences are in shaping ideas about gender roles, sexual identities, and romantic relationships. The concept acts as a call to action, urging more critical engagement with cultures and media in order to combat damaging stereotypes, advance inclusion, and generate inspiring stories that encourage people of all genders and sexual orientations to accept their true selves.

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## CHAPTER 16

### Gender and Work in the Global Economy: Challenges and Perspectives

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#### ABSTRACT:

The multidimensional link between gender and employment in the context of the global economy is critically examined in this chapter. It examines the interactions between gender roles, norms, and inequities and the worldwide dynamics of labour markets, employment practises, and economic growth. The research seeks to clarify the potential and obstacles for attaining gender equality in the workplace and promoting inclusive economic development globally by exploring the intricacies of this connection. Beginning with the historical framework of gender and work, the chapter acknowledges the long-standing division of labour based on gender and the ongoing gender pay disparity. In different sectors and geographical areas, it examines how cultural expectations and established gender norms have influenced women's access to opportunities and career choices. In order to advance gender parity in the workforce, the chapter emphasises the need of challenging these structural inequalities. The impact of institutional and governmental frameworks on gender and workplace dynamics is also covered in the research. It investigates how labour market laws, social safety nets, and affirmative action practises affect women's engagement in the formal sector and the reduction of the gender pay gap. In order to overcome the particular difficulties encountered by women in the workforce, the chapter emphasises the significance of gender-sensitive policy. Furthermore, this chapter investigates how the global economy may promote gender-inclusive economic growth. It emphasises how enhancing the economic productivity of women may help reduce poverty and promote sustainable development by investing in their education, healthcare, and financial access. In order to fulfil the Sustainable Development Goals, set out by the United Nations, the chapter emphasizes the significance of gender mainstreaming in economic development policies.

#### KEYWORDS:

Gender, Global Economy, Policies, Social, Work.

#### INTRODUCTION

Gendered processes interact with multiple social inequalities at work to affect the types of jobs that people have, how they experience those jobs, and whether those jobs give them secure, fulfilling careers with room for advancement or consign them to insecure, dangerous, or even demeaning labour. In the US, striving for success is meant to be rewarded with a wide range of monetary and social benefits. The backdrop of hard labour, such as whether it is paid or unpaid, paid at minimum wage or six figures per year, is deeply and intricately gendered. As we previously discussed, childcare is a demanding job that is mostly performed by women and is often undervalued or unpaid at all. Women are also pushed into specific job paths, and whether or not they want it, they are put on lower earning and less respected mommy tracks even if they

don't undertake the majority of this task themselves. By seeing who looks after North American children when middle-class moms have full-time jobs and employ nannies, who are often immigrant women from Eastern Europe and the Global South, we can also detect institutionalized labour inequities at the global level[1], [2].

### **Work and Gender in the US**

Women in the US are working year-round, full-time jobs at higher rates than ever before.<sup>1</sup> It wasn't always like this. The rise in women's labour market involvement has been spurred by changes in the economy, an increase in single moms, educational and employment prospects, as well as cultural transformations brought about by feminist movement politics from the 1960s and 1970s. Compared to the breadwinner-homemaker paradigm that became popular in the 1950s, when women remained at home and performed unpaid work while men worked in the paid labour market to support a spouse and children, dual-earner households are far more widespread. It turns out that this common American myth, which is often referenced in political family values discourse, was never a reality for most white, middle-class homes and is now totally out of reach.

Despite the fact that the proportion of men and women engaging in the labour market, in higher education, and in paid job is almost equal, there is still a salary disparity between men and women employees. Women who work make, on average, 77% of what males do. Even after accounting for educational variations, full-time vs part-time employment, and year-round versus seasonal occupational statuses, this discrepancy still exists. As a result, women with comparable educational backgrounds who put in the same number of hours per year as men earn 23% less than males in a comparable situation. Therefore, how can this disparity be justified? Researchers suggested four reasons for the gender pay gap: Occupational segregation, undervalued employment, intrinsic work-family issues, and discrimination are the first three. The majority of individuals think discrimination in employment has long since disappeared. Discrimination in employment based on race or gender has been prohibited since the 1964 Civil Rights Act was established.

Although businesses may no longer specify men only in their job postings, they can still make an attempt to hire men by posting job openings in men's social networks and selecting males for interviews from the application pool. The same businesses may also have unwelcoming family leave policies that might deter women from applying because they believe they are disproportionately more likely to be main carers. Due to the fact that no government body actively monitors societal norms and practises, discrimination incidents are therefore very difficult to prosecute legally. As a result, people must report and establish specific instances of discrimination in particular workplace contexts. Discrimination in hiring, in particular, may go largely unchecked since it is so difficult to show in court. Women who work in industries where males predominate sometimes encounter a glass ceiling, which prevents them from moving up to positions of greater responsibility within an organisation, even after they have been employed. The class action lawsuit between Wal-Mart and its female administrative personnel is one illustration of the glass ceiling and gender discrimination.

Wal-Mart has employed several women in executive positions around the nation, but they also have unofficial national procedures that promote males more quickly and compensate them at a lower salary scale. Although just six Wal-Mart employees brought the lawsuit, nearly 1.5 million women would be impacted by the outcome. Ten years passed as Wal-Mart battled this court fight. In June 2011, after much deliberation, the US Supreme Court ruled in favour of the

defendant, Wal-Mart, noting the difficulties of classifying all women employees of Wal-Mart's retail empire as a single class. They acknowledged that there was individual discrimination, but they were exonerated because it could not be shown that the Wal-Mart business discriminated against women as a group. Despite the fact that Wal-Mart did nothing to stop its male managers from systematically and blatantly recruiting and promoting males over women, this carelessness was insufficient to hold the retailer accountable for class-action discrimination. This illustrates how gender discrimination may occur in deliberate and pervasive ways even when it is against the law. A number of other variables make it difficult to pursue gender discrimination [3], [4].

A large portion of the information in this chapter was taken from Dale Melcher's October 26, 2009, guest lecture. A divided labour market where one group is much more likely to do certain kinds of employment than other groups is referred to as occupational segregation. When males are more likely to do certain tasks and women are more likely to perform others, this is known as gendered occupational sex segregation. Pink-collar occupations are those where women are more likely to work. While white collar refers to well-paid managerial work and blue collar refers to manual labour performed primarily by men with a full range of income levels depending on skill, pink collar refers to mostly low-paying, female-dominated positions that involve services and, frequently, emotional labour. The sociologist Arlie Russell Hochschild used the phrase emotional labour to characterise employment in which workers are required to regulate and manage their emotions as a necessary component of their duties. For instance, a waitress who confronts unpleasant and pestering clients with rage runs the danger of losing her job; to do so, she must both restrain her own emotions as well as assist in calming down the customers.

Emotional labour is a component of all service-based jobs that entail engaging with consumers. Secretaries, teachers, and nurses the top three pink-collar professions where women predominate all entail a tremendous amount of emotional labour. In addition to being underpaid, labour that is considered to be women's work is also seen as having lower value in society than work that is considered to be men's work. In the service sector, care work is feminized, demands a great deal of emotional labour, and is often underestimated. Most people who look after youngsters and the elderly are women. According to economist Nancy Fibre, care labour is underestimated because women are more likely to do it and because it is assumed that women naturally know how to take care of others. Traditionally, women have provided free care for ill and elderly relatives as well as for sick and young children in the household. Perhaps this is due to the notion that women are more emotionally sensitive by nature than males since they carry children.

## DISCUSSION

Some people believe that providing these services should always be done for free, even by those who are not relatives. According to gender stereotypes, loving tendencies are innate in women, hence there is no need to compensate them generously for their labour. Actually, just like any other form of labour, care work necessitates acquired abilities. What's intriguing is that males really have a tendency to earn more money and progress to higher-level positions more quickly than equivalent women when they engage in this work and other pink-collar employment. In contrast to the glass ceiling, this phenomenon is referred to as the glass escalator. Adia Harvey Wingfield, however, applied an intersectional analysis to the idea of the glass escalator and discovered that men of colour do not gain as much from this system as do white males. The fourth and last factor for the gender pay difference has to do with the fact that women are more

likely than males to have to compromise between work and home obligations. For instance, women are significantly more likely than males to take time off from their careers to care for their children. This is not a natural result of having children. Many nations allow female employees to take paid time off and return to their positions with the same pay and perks they had when they left. The Family and Medical Leave Act of 1996, on the other hand, is the strongest legal measure safeguarding people's employment in the United States in the event that they need to take time from work to care for the ill or old, or to take personal time for pregnancy and childcare.

Most businesses are required by this law to provide their employees to take up to twelve weeks of unpaid leave. Unfortunately, few employees can afford to miss so much work without receiving a wage, therefore this policy is still seldom used. The FMLA only applies to employees who work for organisations with more than 50 employees, which means that only around half of the US labour force is qualified for leave under the law. Additionally, a lot of businesses are either ignorant of this law or fail to let their staff know that they are entitled to this leave. Women are thus more likely to leave their full-time employment and start working part-time while their kids are still young. When a person leaves the workforce and then returns, they often start at the bottom of the pay and status ladder at a new organisation. This has a detrimental influence on women's total wages, even when they return to full-time employment[5], [6].

### **The US Welfare State and Gender**

Nations and national policies are gendered in several ways. We shall concentrate on the American welfare state in this part. Here, we explain arguments and provide instances, but we do not go into exhaustive detail on the welfare state. Welfare encompasses social security, subsidized health insurance, daycare, and food subsidies like food stamps in addition to its most well-known form. Additionally, the American government provides corporate assistance by way of subsidies. Most welfare recipients are stigmatized and seen to be unworthy, while businesses that get subsidies are thought to be entitled to them. In the US, the distribution of welfare is gendered, with women especially mothers having a substantially higher likelihood of receiving aid than males. It is more difficult to support a single-parent home on one woman's salary than on one man's income since, on average, women make less money than men do and often take time off from work. This is made considerably more challenging for working class or impoverished women, whose jobs may not even pay enough to keep them fed and clothed without help from family, friends, or the government.

The US welfare system was essentially destroyed by the Personal Responsibility/Work Opportunities Reconciliation Act of 1996. As we previously reported, the statute places a 60-month lifetime cap on assistance receipt. To address the political problem of mothers receiving aid, the legislation also contains several genders-specific restrictions. Former House Speaker Newt Gingrich made the controversial suggestion that welfare moms' children should be placed in orphanages rather than being nurtured by their mothers. This idea found its way into PRWORA in the form of an optional state-level provision that would prevent women who were already receiving welfare benefits from receiving extra funds to support any more children. This provision, commonly referred to as the family cap provision, inadvertently reinforces the humiliating and untrue notion that women on assistance have children in order to get more money from the government.

According to feminist political scientist Gwendolyn Mink, welfare reform disadvantages low-income single mothers and families of colour and devalues unpaid caregiving. Poor single moms became, in Mink's words, a separate caste, subject to a separate system of law as a result of welfare reform. Only poor single moms are required by law to work outside the house in America. They are the only individuals in America who are penalized by the government for choosing to have children. Additionally, they are the only moms in America who are required by law to make place in their homes for biological dads. This example demonstrates how state regulations devalue the gendered care labour that women disproportionately undertake, single out poor women of colour for regulation, and uphold heteronormative gender norms of the breadwinner and the housewife.

Furthermore, governmental laws controlling marriage and family life are connected to welfare. For instance, the Healthy Marriages Initiative of the Bush Administration, which supported marriage by giving government funds, made the assumption that marriage lowers poverty. That two salaries are often preferable than one is accurate. But not all moms identify as heterosexual, want to wed the child's father, or even want to get married at all. Furthermore, marriage is not a guarantee of financial stability, particularly for those who live in economically disadvantaged areas where they are more likely to marry similarly disadvantaged partners. The majority of couples marry inside their present social status. Without taking into account the fact that many women experience intimate partner abuse, Gingrich and others believed that women would marry the fathers of their children. Last but not least, the majority of marriages nowadays end in divorce. It is obvious that the goal of this project was more to advance a political philosophy than it was to address the social issue of poverty. Welfare moms are often discussed in discourses that evoke gendered, classed, raced, and sexualized imagery.

This portrayal hides the truth that white males routinely violated Black women both during and after independence. Welfare receipt is racialized to the point that the only pictures of welfare we appear to see are of single moms of colour, despite the fact that the majority of individuals getting social services are white and, in particular, the majority of single mothers on welfare are likewise white. As we've already stated, the poor are often portrayed as immoral, foreign, and un-American. These prejudices would go away if receiving assistance was instead not stigmatised but rather acknowledged as something that families, friends, and neighbors received at different stages of their life. For instance, the mother of one of the writers of this essay gets disability payments from social security yet is vehemently opposed to poverty. The notion that white middle-class people do not get welfare even while they do receive various types of government assistance supports this paradox [7], [8].

This term touches on themes of class, gender, and race in addition to sexuality and race. The myths that women on assistance have uncontrollable pregnancies, never get married, and are unaware of the fathers of their children are modern manifestations of the Jezebel-controlling stereotype of Black women as promiscuous that dates back to American enslavement. Around the globe, a disproportionate number of women live in poverty. The phrase feminization of poverty refers to a global trend that has seen an increase in the number of women living in poverty, even though many of them are employed. Women may either be supported by a breadwinner or struggle to make ends meet due to the uneven resources available to them and the disproportionate amount of unpaid labour expected of them. Sustainable breadwinner salaries are difficult to achieve, even for males, as a result of the global economic crisis and historical



economic links between the Global North, which refers to the world's richer nations, and the Global South, which refers to the world's poorest countries.

### **Globalisation and International Production**

The word globalisation, which is often used, may be advantageously abbreviated. This abbreviation, however, runs the danger of combining a wide variety of intricate economic, political, and cultural issues. The term globalisation refers to both the advantages and disadvantages of living in a linked globe. Once upon a time, the Internet was hailed as the great equalizer in international communication. Without a doubt, we are used to receiving news from all viewpoints and all around the world. In the absence of official news outlets, activists in other nations, such as Egypt and Iran, have made notable use of social networking platforms like Facebook and Twitter to report what is occurring locally. During the Arab Spring upheavals in early 2011, Egyptian activists used these social networking sites to organise protests and marches, forcing the Egyptian government to shut down the Internet for a number of days.

With advantages for some and drawbacks for others, globalisation makes it feasible for social change agents in many nations to connect with one another as well as for people, information, and goods to travel across borders. It enables people of Massachusetts to enjoy fresh fruit throughout the winter months, but it also decreases the pay of agricultural laborer's who collect the fruit in tropical nations, promotes oppressive political systems in those nations, and increases the carbon footprint of food production and distribution. Social movements and governmental, development, and conservation organisations may have an impact on one another in globalized situations. For instance, Colombian activists used neoliberal development narratives to influence the goals and intentions of governmental, development, and conservation organisations while also legitimizing their presence. Globalisation thus has costs and advantages that vary depending on one's social place and are not equally good or bad. Trade ties the many nations of the globe together. To the degree that our economy is dependent on imports, the US is dependent on the capabilities and resources of other countries. How then can the US economy continue to be primarily profitable? Manufacturing facilities in the US didn't just shut down in the face of competition; multinational firms, or businesses that operate across many political boundaries, took deliberate steps to boost their profitability.

Paying employees less in salary and benefits is one approach to significantly boost profitability. In the US, labour laws and union contracts ensure safe working conditions, prevent employees from working long hours at a single job, and provide a minimum salary. American labour is hence costly to companies. Due to the fact that employees' rights are less protected and wages are lower in the Global South, US-based businesses often outsource manufacturing to these countries. Sweatshops, where employees are forced to work long hours for little compensation and aren't allowed to eat or use the lavatory while at work, are one effect of outsourcing. Because the global factories in which they work export items to be sold in richer nations of the Global North, these employees seldom buy the things they aid in manufacturing, often because they cannot afford them. These factories primarily hire young, unmarried women from Asia, Latin America, and the Caribbean since these employees are seen as the most submissive and docile, meaning that businesses believe they are less likely to demand more from their employers or form a union[9], [10].

Multinational firms take part in global commodity chains as opposed to a nation's employees creating commodities, selling those items back to its citizens, and maintaining earnings within

the nation's boundaries. Globalisation allows for the extraction of resources from Country B, the production of products in Country C, the sale of those items in Countries D, E, and F, and the disposal of garbage in landfills in Country G, as Cynthia Enloe's essay *The Globetrotting Sneaker* makes apparent. Profits from the manufacture and sale of these commodities flow mostly to the firm, with little entering the economies of the participating countries. In the 1980s, military governments in South Korea lured brands like Nike, Adidas, and Reebok by suppressing labour unions. After South Korean workers effectively organise themselves, manufacturers relocated to Indonesia. The race to the bottom logic of global industrial production refers to this practise of relocating to remaining locations of inexpensive labour before workers organise.

International institutions have been established as a result of the growing economic globalisation. These international organisations are supposedly established to keep an eye out for violations and support the development of less developed countries via loans from more developed ones. The World Bank offers financial assistance for huge, expensive projects like building highways and dams. Through structural adjustment programmes, the International Monetary Fund primarily supports ties in international commerce. A nation from the Global North essentially loans money to another country from the Global South in return for resources in a SAP. For instance, the US may provide Chile a loan to help with the development, harvest, and manufacture of wine. In return, the US would buy wine and grapes at a reduced price from Chile and have influence over Chile's financial decisions until Chile repaid the original debt. The issue with this is that the lending process is often circular, leaving the country taking the loan perpetually indebted to the original lender country. For instance, a country could produce the majority of its grain for export while being unable to feed its own citizens, necessitating the need for further loans. Devalued currencies, privatised companies, reduced social programmes and government aid, and higher taxes to pay for infrastructure development are all effects of SAPs.

With few governmental limitations and regulations, free trade refers to a collection of institutions, policies, and philosophies that enable corporations to participate in cross-border business ventures in order to maximise profit. The World Trade Organisation, an international unelected agency whose goal is to fight trade restrictions, is one institution that was established to promote free trade. Some nations regulate industrial pollution levels; the WTO views such production restrictions as obstacles to free trade. They operate on the belief that the greatest way to get money is via unrestricted, free market capitalism. Minimal wages and avoiding environmental restrictions may be more lucrative, but proponents of free trade do not account for the human costs to health, safety, and happiness costs that cannot be quantified in monetary terms.

The North American Free Trade Agreement of 1994 is one such free trade pact. An agreement known as NAFTA was reached by Canada, the US, and Mexico to encourage the free movement of people and goods. The largest impact of this Act is the widespread transfer of factories from the US to Mexico in the form of maquiladoras that sell products back to US customers at cheap costs, leading to the loss of 500,000 union jobs in North America. With the exception of Cuba, which is subject to trade restrictions because of its communist-run government, the Free Trade Area of the Americas of 2002 extends NAFTA across the entire Western Hemisphere. The effects of these free trade agreements are now a contentious political topic. While some claim it led to unionized, better paid employment, others assert that despite many bad effects, more access to jobs, goods, and resources has resulted in several positives. Fair trade initiatives that

support secure working conditions and livable salaries have emerged in response to efforts to advance free trade, particularly in the coffee and chocolate sectors.

Neoliberalism is the philosophy that governs the present global economic system. However, in terms of political philosophy, the word liberalism refers to constraints on state authority to avoid government encroachment on individual rights, which transcend party loyalties. In the current American context, the term liberal is associated with the American Democratic Party. Economic liberalism, which refers to the idea that markets function best when there is little regulation or intervention from the government, is distinct from the liberalism associated with the Democratic Party and defines the free trade economic policies we mentioned before.

Neoliberalism is a market-driven approach to economic and social policy in which social policies and programmes are reduced in order to boost profits. The reduction of the public realm and social welfare programmes that unions and advocates for racial justice have campaigned for since the early 20th century is a key neoliberal aim. According to feminist historian Lisa Duggan, neoliberalism is more than just the privatisation of the economy; it is an ideology that maintains that once underrepresented groups have access to established institutions and can freely purchase goods, they have attained equality with their privileged peers. Therefore, neoliberal ideology presupposes that social movements that aim to substantially transform established institutions and expand social welfare programmes are outmoded since our society has entered a post-civil rights age. However, as this textbook has shown, established institutions and power systems often perpetuate disparities.

### **Labor that is racialized, gendered, and sexualized in the world economy**

People are affected differently by the structure of the global economy depending on their gender, race, and the economic conditions of the countries in which they reside. The political climate of colonialism in many countries of the Global South is largely reproduced through predatory commercial agreements between states. The exploitation of a country's resources and people have prompted many to label neoliberal economic practices as a kind of neocolonialism, or contemporary colonization. Concepts like colonialism and neocolonialism highlight the racialized worldwide disparities between people of colour in the worldwide South and white, wealthy people in the Global North who were historically colonizers. Scholars in the Asian and Middle Eastern diasporas expanded criticisms of colonialism, empire, slavery, and neocolonial racist-economic oppression, which gave rise to postcolonial theory. Postcolonial academics mainly dissect and criticised colonial discourses, representations of colonised Others, and the prejudiced images of those they colonised that European scholars portray as knowledge. Decoloniality theoretical approaches, which were first developed in Latin America, shed light on how colonization invented concepts like the colonised, modernity, and coloniality, disrupted social structures, relationships between people of different genders, and altered understandings of what it meant to be male and female.

Global economic policies have a disproportionately negative effect on women of colour in the Global South. Women are not only far more likely than males to work in low-paying industrial occupations in Asia and Latin America, but they are also significantly more mobile in terms of immigration. When it comes to low-wage industrial jobs, domestic and sex work markets, and other nations, women have more labor-based mobility. Transnational motherhood refers to the practise of mothers who relocate to other countries giving up time with and care for their own children in order to work as domestic helpers for wealthy families. Two areas of the service

industry where women immigrants labour include domestic work and sex work. The economic situation is such that undocumented immigrants may make more money in illicit and unregulated markets in countries of the Global North than in regulated markets of the official economy. Immigrants, particularly undocumented immigrants, have limited alternatives for making money. As a result, it is typical for immigrant women to engage in unreported sex or domestic labour in the informal economy, where both the employer and the client do not file taxes [11], [12].

Additionally, immigrant women work in various sectors of the Global North's service sector. Miliann Kang has researched immigrant women who work in the beauty industry, especially in nail salons. This kind of job may benefit women for whom English is a second language or those who might be undocumented since it does not demand a high level of ability or experience. Nail salon employment requires emotional labour, much like any other service industry profession. Although some customers may see the beauty salon technician as their confidant, their relationship is essentially one of unequal labour, in which one side is compensated not just for the work they do but also for their pleasant dispositions and attentiveness. Body labour is the term Kang uses to describe this form of work that requires both emotional and physical labour. It is exhausting to exert both emotional and physical labour at work. Additionally, manicure and hair salon employees use harsh chemicals at work that are hazardous to their health and increase their risk of developing cancer.

In addition to existing in the local US labour market and resulting in variations in work and compensation, gendered, racial, and sexualized differences also characterise the globalized labour market. The quality of life of people throughout the globe is significantly impacted by trade interactions between nations and the neoliberal ideology that underpins them. Women are disproportionately affected by developments in the global economy since they labour in factories in some nations and provide domestic, sex, and beauty services in others. Thankfully, fair trade and anti-sweatshop laws. In the face of well-funded and strong multinational companies and international trade organisations, the Racialized, Gendered, and Sexualized Labour in the Global movements are working to improve these circumstances alongside the indigenous, decolonial, feminist, and labour movements.

## CONCLUSION

This explores how gender and the workplace are affected by globalisation. It looks at how labour markets have been affected by economic restructuring and the expansion of global supply chains, which has feminised several sectors of the economy including the apparel and home services. It also looks at the additional difficulties that the integration of the world economy has brought about for achieving gender equality, such as the exploitation of female employees in low-paying and insecure jobs. This conclusion highlights how crucial it is to comprehend how gender and work connect in the global economy. It draws attention to the difficulties and possibilities for attaining gender parity in the workforce and fostering inclusive economic development. Policymakers, companies, and international organisations may strive towards establishing a more just and successful global economy that benefits all people, regardless of gender, by recognising and removing the structural hurdles that prevent women from achieving economic empowerment. The chapter is a plea for coordinated action to put gender equality at the top of the global economic agenda, paving the path for a more equitable and inclusive future.

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## CHAPTER 17

### Historical and Contemporary Feminist: Social Movements

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#### ABSTRACT:

History is also everyone talking at once and playing many rhythms at once. The individuals and events we write about weren't isolated; rather, they interacted with a wide range of other people and things. In reality, millions of individuals are speaking at once at any one time. As historians, we attempt to focus on and investigate a single conversation, but the challenge is to place that discussion in a setting that reveals how it interacts with several others. In other words, we must figure out how to make a single song stand out while still being connected to all the other lyrics being sung. Elsa Barkley Brown, a feminist historian, points out that, contrary to what we often assume in modern life, social movements and identities are intertwined. In order to understand privilege and oppression and how the histories of feminists and people of color fighting for justice have been historically connected through overlapping and occasionally conflicting social movements, she contends that we need a relational understanding of social movements and identities within and between social movements. In this chapter, feminist movements from the 19th century to the present are discussed and explained through a relational lens. Despite the fact that we use the terms first wave, second wave, and third wave, categorising feminist resistance into these waves is problematic because it suggests that different waves of activism prioritised different issues in each era, obscuring histories of feminist organizing in places and around issues that were not covered by the dominant wave's narratives. These waves are not entirely distinct from one another or mutually exclusive. In reality, they are mutually reinforcing, not just in the sense that previous feminist activism helped make modern feminist work feasible in many ways, but also in the sense that current feminist activism influences how we see prior feminisms and feminist activism. However, given that the wave language has a rich history, we employ it extensively in this section. Similarly, while a focus on well-known figures, political movements, and social movements can obscure the many individuals and activities involved in everyday resistance and community organising, we do so in the knowledge that doing so advances a particular historical lens.

#### KEYWORDS:

Feminist, Gender, Historical, History, Social.

#### INTRODUCTION

Feminist ideas and academic knowledge have also been developed, made feasible, and supported by feminist movements. Feminist movements are excellent examples of praxis in this sense since they employ critical thought on the world to affect change. The reason that feminist history is a viable area of study now is due of different social movements, including feminist activism, workers' activism, and civil rights activism during the 19th, 20th, and 21st centuries. In order to



rethink and challenge the histories that have traditionally been written from the experiences and points of view of the powerfulthe histories we typically learn in high school textbooksfeminist history draws on the experiences of historically marginalized and ignored groups.

### **Feminist movements in the 19th century**

Midway through the 19th century saw the start of what has come to be known as the first wave of the feminist movement, which persisted until the 19th Amendment, which granted women the right to vote, was passed in 1920. First-wave white middle-class feminists from the late 19th to the early 20th century, including suffragist pioneers Susan B. Anthony and Elizabeth Cady Stanton, concentrated mainly on women's suffrage, overturning coverture laws, and securing access to school and work. The Seneca Falls Declaration of Sentiments, which was the outcome of the first women's rights conference in the United States in 1848, notably contains these objectives. At the time, it was rather radical to demand women's suffrage, an end to captivity, and access to jobs and education. The four main tenets of the cult of true womanhood, piety, purity, submission, and domesticity, which held that white women were naturally and rightfully situated in the private sphere of the home and unfit for public, political participation or employment in the waged economy, were challenged by these demands[1]–[3].

However, the white middle-class perspective of the movement's founders influenced this focus on challenging the cult of authentic womanhood's philosophy. The religion of real womanhood was an ideology of white femininity that systematically denied black and working-class women access to the category of women, as we explored in Chapter 3, since these women were forced to work outside the house due to need. The first wave movement's goals were set by the white middle-class leadership, who often ignored the issues and involvement of working-class women and women of colour. For instance, in order to separate themselves from other suffragists who favoured the passing of the 15th Amendment, which would provide African American males the right to vote before women, Elizabeth Cady Stanton and Susan B. Anthony founded the National Women Suffrage Association. Instead of forging links between people of different racial and socioeconomic backgrounds, Stanton and Anthony gave white women's rights priority. They thus considered women's suffrage to be the main objective of the women's rights movement[4]–[6].

We shall show that the ballot will secure for women equal place and equal wages in the world of work; that it will open to her the schools, colleges, professions, and all the opportunities and advantages of life; that in her hand it will be a moral power to stop the tide of crime and misery on every side, for instance, Susan B. Anthony wrote in the first issue of her newspaper, *The Revolution*. Working-class women and women of colour understood that racial and economic inequality could not be eliminated by just having the right to vote. Working-class women were seldom moved by the suffragists' promise that the vote would enable them to become equal to their mentheir exploited, suffering men, argues feminist activist and historian Angela Davis. Additionally, Black women suffragists were prohibited from joining the National American Woman Suffrage Association, the biggest suffrage organisation and a branch of the National Women Suffrage Association. Although middle-class white women dominated the first wave movement's definition and leadership, there was substantial overlap with the abolitionist movement, which aimed to abolish slavery, and the racial justice movement after the Civil War.

According to historian Nancy Cott, having self-ownership and control over one's body played a significant role in both revolutions. That meant liberation for slaves from their owners' sexual abuse of many enslaved Black women, as well as freedom from lifelong, unpaid, forced labour.

For married white women, it meant being able to reject their husbands' advances sexually and being recognised as individuals in the eyes of the state. Abolitionist Antoinette Brown said in 1853 that the wife owes service and labour to her husband as much and as absolutely as the slave does to his master. White middle-class abolitionists often compared marriage and slavery. This comparison between marriage and slavery had historical relevance at the time, but it was problematic in that it confused the very distinct oppression that white women under coverture experienced with the particular experience of racist oppression that African American women under slavery endured. This effectively demonstrates Angela Davis' contention that despite the significant contributions that white women abolitionists and feminists made to anti-slavery efforts at the period, they often did not comprehend the particularity and gravity of slave women's lives as well as the intricate structure of chattel slavery[7]–[9].

### DISCUSSION

Moving between the racial justice and feminist movements, black activists, authors, newspaper publishers, and academics argued for inclusion in the first wave feminist movement and denounced slavery and Jim Crow laws that upheld racial segregation. This disputed connection between the first wave women's movement and the abolitionist struggle was beautifully reflected in Sojourner Truth's famous *Isn't I a Woman?* speech, which has been credited to the Akron Women's Convention in 1851. In her statement, she denounced the inequities of slavery while also criticizing the exclusion of black women from the women's movement: That guy over there believes that ladies need to be carried into carriages, hoisted over ditches, and given the greatest spot wherever. Nobody ever offers me the greatest position or helps me get into carriages or through pools of mud! And I'm a lady, right? Observe me! Check out my arm! No one could lead me while I dug, planted, and collected into barns. Only Jesus listened to me as I screamed out in my mother's pain after having thirteen children and seeing the majority of them being sold into slavery. And I'm a lady, right?

The accuracy of this portrayal of the speech has been contested by feminist historian Nell Painter, who claims that white suffragists significantly altered both its substance and title. This demonstrates how some powerful social players may shape the narrative and potentially mislead weaker characters and social movements. Black women have emerged as passionate and effective leaders while being marginalized. Ida B. Wells was a prominent woman's suffrage activist who helped found the National Association for the Advancement of Coloured People. She was also a journalist and the author of numerous pamphlets and articles that exposed the Reconstruction-era lynchings of thousands of African Americans. Despite the 14th Amendment's ratification in 1868, Wells said that lynching took place throughout the Reconstruction Period as a deliberate endeavour to perpetuate racial inequality. The National Association of Coloured Women's Clubs, a pro-suffrage organisation with thousands of African American members, also did not get recognition from the mostly middle-class, white National American Woman Suffrage Association.

The idea that providing women the ability to vote would give them unrestricted access to the institutions they had been banned from, as well as equality with males, was put to the test with the passing of the 19th Amendment in 1920. This argument was conclusively disproven, just as the 18th Amendment's enactment and subsequent pushback had done. Black women and men were denied access to voting, education, employment, and public facilities as a result of the complex Jim Crow laws in place in states across the nation, the formal legal endorsement of the

doctrine of separate but equal in *Plessy v. Ferguson* in 1896, and the unchecked violence of the Ku Klux Klan. The 18th and 19th amendments guaranteed equality under the law, but the reality on the ground—continued racial and gender inequality—was very different.

### **Female Movements from the Early to the Late 20th Century**

Social movements are dynamic entities that alter based on their wins and losses, which are often highly influenced by the political and social environments in which they are conducted. Feminist activists focused their efforts after women were granted the right to vote in 1920 on using institutionalized legal and political avenues to modify labour regulations and combat discrimination against women in the workplace. The YWCA, the American Association of University Women, and the National Federation of Business and Professional Women lobbied lawmakers to pass legislation that would legally forbid discrimination against women in the workplace. In 1920, the Women's Bureau, a federal agency established to craft policy according to women workers' needs, was established.

On how to attain equality, however, and what it should look like, these organisations were not always in agreement. For instance, the BPW backed the Equal Rights Amendment, which they said would successfully put an end to discrimination against women in the workplace. The Women's Bureau and the YWCA, on the other hand, opposed the ERA, claiming that it would undermine the advancements that organise labour had already accomplished. The conflict threw into sharp focus the opposing goals of treating working women as workers first and foremost against treating them as first and primarily women. The ERA is still up for dispute even among feminists, almost a century after women were granted the right to vote. Although there were already millions of women employed in the United States before the start of World War II, the lack of workers made it possible for millions of women to move into higher-paying manufacturing occupations that had previously been held by males. During World War II, approximately 125,000 African American soldiers served in segregated groups at the same time, sometimes being sent to the front lines of the riskiest missions.

The segregated units with the greatest death tolls in the war were Japanese Americans whose families had been incarcerated. Both the African American men who had served in the war and the women who had worked in high-paying factory jobs returned to a society that was still firmly segregated after the war, and they were expected to resume their prior inferior roles. Despite the 1950s' conservative political atmosphere, civil rights activists started to oppose both the de facto segregation that African Americans were subject to on a daily basis and the de jure segregation of Jim Crow legislation. The important *Brown v. Board of Education* decision from 1954, which outlawed separate but equal educational facilities, gave activists a crucial legal foundation on which to fight Jim Crow laws' institutionalized racism. In the end, the Black Freedom Movement, also known as the civil rights movement, would significantly alter US society and serve as an inspiration for both the second wave feminist movement and the radical New Left political groups in the late 1960s.

Although popular depictions of the civil rights movement focus on the stories and lives of its leaders, the grassroots mass movement that used nonviolent direct-action strategies to demand full legal equality for African Americans in US society was made up of working class African American men and women, white and African American students, and clergy. For instance, Rosa Parks, who is renowned for starting the Montgomery Bus Boycott by refusing to give up her seat at the front of a Montgomery bus to a white passenger in December 1955, wasn't acting out of

loneliness or frustration at the time. Parks had been active in the local NAACP for fifteen years, and her decision to make this stand against segregation was part of a lifelong commitment to racial justice, according to feminist historians Ellen Debois and Lynn Dumenil. Finding a strong test case to challenge Montgomery's bus segregation in court has long been a goal of NAACP officials. Additionally, the 381-day bus boycott that started following Parks' incarceration and included working-class African American and white women activists was a planned political movement.

The working-class Black women who commuted to their employment as domestic helpers in white homes using public transit refused to utilise the bus system instead choosing to walk or rely on rides from a carpool set up by female activists. Additionally, the Women's Political Caucus of Montgomery disseminated flyers to support the boycott and laid the foundation and planned its execution before it started. The Greensboro sit-ins, which occurred in Greensboro, North Carolina, in February 1960, when four African American students sat down at a segregated lunch counter at a Woolworth's shop and refused to leave, also helped to launch the sit-in movement. As the days and weeks passed, more students joined the sit-ins, and the sit-ins started to be covered by the national media. In the early 1960s, networks of student activists started discussing the advantages of the nonviolent sit-in technique and started holding sit-ins in their own cities and towns throughout the nation.

The Student Non-Violent Coordinating Committee was established by Ella Baker immediately after the initial sit-in strikes in Greensboro, which is an important development in the sit-in movement. The Freedom Rides of 1961 were organised by the student activists of the SNCC in an effort to overturn the Jim Crow laws of the South, which the Interstate Commerce Commission had declared unlawful. Participants in the Freedom Rides included both African Americans and white men and women. The Congress of Racial Equality and the SNCC continued to send freedom riders to Birmingham prisons despite the fact that they had been subjected to horrific mob violence there and had been imprisoned. In 1964, the SNCC took part in Freedom Summer, a movement that attracted mostly white college students from the north to the south in order to assist the efforts of black southern civil rights activists to secure voting rights for African Americans. Despite facing mob violence once again, Freedom Summer activists were successful in drawing attention to southern governments' refusal to provide African Americans the legal rights they had achieved through activism and grassroots organising.

The non-hierarchical organisation of SNCC opened doors for women to engage in the civil rights movement in ways that had previously been closed to them. However, the profoundly ingrained misogyny of the community culture continued to permeate civil rights groups, such as SNCC. Men held the bulk of the official leadership positions in the Southern Christian Leadership Council, the NAACP, and CORE, despite the fact that women performed crucial roles as activists and organisers throughout the civil rights movement. Black women activists who joined SNCC and rose to prominence in the civil rights movement in the early 1960s included Fannie Lou Hamer and Diane Nash. Women in the SNCC were often required to do women's work in spite of this. In a memo titled *Sex and Caste: A Kind of Memo*, sent by SNCC in 1965, white women activists Casey Hayden and Mary King criticised this perpetuation of gendered roles within the movement and urged discussion about sexism within the civil rights movement.

The letter had a significant role in the emergence of the second wave feminist movement, which was dedicated to challenging patriarchal systems of power in general and professional sex

discrimination in the workplace in particular. Second wave feminism, however, came from a variety of places, and not all feminist groups were led by white women. According to historian Becky Thompson, multiracial feminist organisations that would later play a significant role in the second wave of feminism in the United States were being developed by Latina, African American, and Asian American women in the middle and late 1960s. The activist resources made available by the civil rights struggle in many ways affected and supported the second wave feminist movement. The historians Ellen Debois and Lynn Dumenil argue that women's involvement in the civil rights movement allowed them to challenge gender norms that held that women belonged in the private sphere and not in politics or activism. They base their argument on the stories of women who participated in the movement.

In addition to joining the second wave feminist movement, many women who were active in the civil rights movement embraced strategies from that movement, such as marches and nonviolent direct action. In addition, the Civil Rights Act of 1964 a crucial legislative success for the civil rights movement prohibited sex discrimination under Title VII of the Act in addition to outlawing employment discrimination based on race. The National Organisation of Women, which was modelled after the NAACP, was founded by 15 women and one male after the Equal Job Opportunity Commission, the federal body established to implement Title VII, generally disregarded women's complaints of job discrimination. The Equal Rights Amendment, the struggle against sexism in the classroom, and the defence of *Roe v. Wade* the 1973 Supreme Court ruling that overturned state laws that forbade abortion during the first three months of pregnancy were the main organising concerns of NOW. Although the second wave feminist movement in the late 1960s and early 1970s addressed gendered injustices and elevated women's problems in national politics, the movement also perpetuated racial and sex disparities.

Black feminist thought was developed as a critique of the ways that second wave feminists frequently overlooked racism and class oppression and how they specifically affect working-class and men and women of colour. Black feminist thinkers included Alice Walker, bell hooks, and Patricia Hill Collins. The Combahee River Collective, established in 1974, was one of the earliest official Black feminist organisations. Bell Hooks, a black feminist, said that in a capitalist, racist, and homophobic society, all men are not created equal, and hence feminism cannot just be a campaign to make women equal to men. So, hooks and other Black feminists maintained that these systems of dominance overlap and support one another, and that sexism cannot be distinguished from racism, classism, and homophobia. She said that in order to combat sexism, you must also combat racism, classism, and homophobia. Importantly, black feminism contends that coalitional action that unites individuals across racial, class, gender, and sexual identity lines is inspired by an intersectional worldview that exposes and analyses many forms of oppression and injustice.

### **Movements for Queer Feminists and the Third Wave**

Third wave feminism is a hybrid movement in many aspects. It is inspired by queer feminism, transnational feminism, global south feminism, Black feminism, and second wave feminism. The experiences of feminists in the late 20th and early 21st centuries, who grew up in a society where equal rights for racial minorities, sexual minorities, and women were supposedly guaranteed by law in most nations, directly influenced the hybridity of third wave activism. However, the disconnect between law and reality between governments' chapter declarations and citizens' actual experiences shows how important both traditional and contemporary forms of activism are.



In a nation where 40% of clients of homeless youth organisations are gay, lesbian, bisexual, or transgender, where white women are paid only 75.3% of what white men are paid for the same labour, where police violence in black communities occurs at much higher rates than in other communities, where 58% of transgender people surveyed experienced mistreatment from police officers in the past year, where people of colour on average make less money and have significantly less access to opportunities, Leslie Heywood and Jennifer Drake contend that the third wave's primary objective must be the development of modes of thinking that can come to terms with the multiple, constantly shifting bases of oppression in relation to the multiple, interpenetrating axes of identity, and the creation of a coalitional politics based on these understandings.

Third wave feminists engaged in a variety of types of activism in the 1980s and 1990s. The AIDS Coalition to Unleash Power formed in the middle of the 1980s to exert pressure on a recalcitrant US government and medical establishment to provide inexpensive medications for persons with HIV/AIDS. The gay and lesbian rights movement, which they believed primarily represented the interests of white, middle-class gay men and lesbians, was distanced from by a more radical subset of people in the latter part of the 1980s. They did this by explicitly reclaiming a derogatory term frequently used against gay men and lesbians. As was said at the beginning of this article, queer sexualities were also described. In order to embrace and assist transgender, gender non-conforming, and people of colour, the queer turn tried to create more inclusive sexual cultures and communities as well as more radical political positions.

An intersectional criticism of the sexual liberation movements' preexisting hierarchies, which marginalized people within already sexually marginalized groups, served as the inspiration for this. The word homonormativity, which was created by Lisa Duggan in this context, refers to the normalisation and depoliticization of homosexual men and lesbians via their integration into capitalist economic institutions and domesticity individuals who were previously construed as other. This led to the continuous marginalization of queers who were non-white, handicapped, trans, single or non-monogamy, middle class, or non-Western, and their loss of access to social life. homosexual identity politics, which ignored the concerns of many homosexual people who were marginalized inside LGBT organisations, was also criticised along with homonormativity. Jasbir Puar invented the word Hom nationalism, which is similar to homonormativity and defines the white nationalism adopted by queers that upholds racist and xenophobic discourses by portraying immigrants, particularly Muslims, as homophobic.

Organising politically around the needs and experiences of individuals who share a certain identity is known as identity politics. One distinguishing feature of the third wave might be the shift away from political connection with people who have the same identification to political association with those who have different identities yet share comparable but different experiences of oppression. The creation of novel strategies to politicize female demands and challenges is another aspect that distinguishes the third wave. For instance, ACT UP started using strong street theatre to bring attention to the suffering and death of individuals with HIV/AIDS, as well as to politicians and pharmaceutical firms who didn't seem to care that thousands of people were dying. They organise sit-ins, inflated huge condoms, and seized the offices of lawmakers and executives from pharmaceutical companies. Throughout the 1990s and the beginning of the 2000s, radical Leftists and anti-globalization activists would adopt and imitate their aggressive tactics.



The ACT UP activists who founded Queer Nation employed its strategies to combat homophobic violence and heterosexism in US culture. Queer Nation was founded in 1990. On May 21, 1990, during the Storm the NIH rally, a large die-in was held on the lawn of Building 1 to end the protest while rows of uniformed police, some mounted on horses, guarded NIH headquarters. NIH History Office's ACT UP Demonstration on the Lawn of Building 1 is in the Public Domain, CC0. Sex-positive feminism became popular among feminist activists and thinkers about the same time as ACT UP was starting to organise in the middle of the 1980s. Sex-positive feminists asserted that sexual liberty within a sex-positive society that valued consent between partners will liberate not just women but also men during what are now known as the Feminist Sex Wars of the 1980s. Sex-positive feminists, such as cultural anthropologist Gayle Rubin, drew on the social constructionist viewpoint to argue that no sexual act has an intrinsic meaning and that not all sex or sex depictions are fundamentally demeaning to women. They said that white women, women of colour, gay men, lesbians, queers, and transgender people groups of people who have traditionally been stigmatised for their sexual identities or sexual practices have made sexual politics and sexual emancipation central areas of struggle.

Therefore, creating sex-positive places and communities that not only valorize sexualities that are often stigmatised in the larger society, but also put sexual consent at the centre of sex-positive spaces and communities, is a vital component of queer and feminist subcultures. The creation of media message that aims to both strengthen feminist communities and generate information from and for disadvantaged groups is a component of this initiative to establish sex-positive, feminist, and queer spaces. It is hardly unexpected that cultural creation is a primary tactic used by modern activists in a media-savvy age. The development of alternative forms of culture in the face of a vast corporate media industry can be seen as quite political, even though some commentators have labelled the third wave as post-feminist or not feminist because it frequently does not use the activist forms of the second wave movement. For instance, the Riot Grrl movement, which was rooted in the US's Pacific Northwest in the early 1990s, included DIY music made mostly by women, independent record companies, feminist publications, and visual arts. They often tackled topics such as gendered sexual assault, sexual liberationism, heteronormativity, gender normativity, police brutality, and war in their songs.

Additionally significant sources of feminist critique on current events and concerns are feminist news websites and periodicals. Alternative forms of feminist knowledge creation include periodicals like *Bitch* and *Ms.* as well as online blog collectives like *Feministing* and the *Feminist Wire*. If we see the battle for autonomy and the development of lives on our terms as basic feminist acts of resistance, then developing alternative cultures on our terms should also be seen as a feminist act of resistance. As we've already discussed, feminist activity and theory from individuals outside the US context have widened the feminist analytical and practical frameworks. Transnational feminism is a corpus of thought and activity that emphasises the linkages between sexism, racism, classism, and imperialism in a society marked by global capitalism, transnational immigration, and a history of colonialism that still has consequences today.

In *Under Western Eyes*, a piece by transnational feminist theorist Chandra Talpade Mohanty, she criticises how much feminist activism and theory has been developed from a white, North American perspective that frequently exoticizes 3rd world women or ignores the needs and political circumstances of women in the Global South. Transnational feminists contend that efforts by Western feminists to save women in other parts of the world do not genuinely free

these women since this strategy treats the women as passive victims who lack the ability to act on their own behalf. These saving initiatives are particularly troubling when they include Western military action. For instance, George Bush and U.S. military officials often said that the war on Afghanistan, which was launched immediately after 9/11 in 2001, was being fought to save Afghani women from their patriarchal and oppressive males. This is a critical omission of the West's and the US's support of Islamic fundamentalist governments in the 1980s.

Furthermore, it portrays Afghan women as passive victims who want Western assistance, which is very similar to the victimizing language often used to discuss victims of gendered violence. Transnational feminists contend that we need to understand how Western imperialism, global capitalism, militarism, sexism, and racism have produced conditions of inequality for women around the world in order to challenge the belief, held by many feminists in the West, that any region of the world is inherently more patriarchal or sexist than the West because of its culture or religion. Third wave feminism, to sum up, is a lively fusion of several activist and theoretical traditions. Perhaps the strongest aspect of third wave feminism is its steadfast unwillingness to be reduced to only representing one set of people or one viewpoint. It also insists on engaging with diverse points of view. Third wave feminism's complexity, subtlety, and flexibility become benefits in a society defined by swiftly changing political conditions, much as how queer activists and theorists have argued that queer is and should be open-ended and never established to signify one thing. In a society where inequalities are fluid, many, and overlapping, the third wave's stress on coalitional politics as an alternative to identity-based politics is an important undertaking.

## CONCLUSION

The relational analysis of feminist social movements has been expanded throughout this unit, from the first wave to the third wave, while also comprehending the limits of classifying resistance actions under an overly simplistic framework of three different waves. We are better able to comprehend how the strategies and initiatives of one social movement might affect others when we use such a relational lens. This perspective makes it easier to see how racist, gendered, and class-based advantages and exclusions contribute to the division of social movements and social movement organisations. This kind of intersectional analysis is at the core of feminist study as well as feminist activity. This intersectional reflexivity, or the criticism of racism, class, and gender dynamics in feminist movements, may even be credited with the vitality and endurance of feminism. Another significant contribution of feminist action and study is the focus on coalitional politics and the drawing of linkages between various groups. Feminist groups now face out against a variety of institutions of power, including racism, ableism, heterosexism, the prison system, war, and global capitalism. What kind of world do we want to build and inhabit? What coalitions and alliances will be required to oppose these power structures? How can working-class people, queers, people of colour, trans people, people who are handicapped, and feminists go about resisting these power structures? Feminist activists are now debating a number of issues, and their activities suggest a growing dedication to an intersectional politics of social justice and praxis.

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## CHAPTER 18

### A Comprehensive Overview: Sexuality and Human Right

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#### ABSTRACT:

The connection of sexuality and human rights is critically examined in this chapter, which also highlights the difficulties and complexity involved in promoting and protecting sexual rights within the larger context of human rights. It examines how society views towards sexuality have been affected by historical biases, cultural norms, and legal frameworks, often resulting in discrimination, marginalization, and breaches of sexual rights. This study aims to highlight the significance of developing an inclusive and comprehensive approach to advocate for the dignity, autonomy, and well-being of all individuals, regardless of their sexual orientation or gender identity, by examining the multifaceted aspects of sexuality as a human rights issue. The chapter opens by setting the historical battles for sexual rights in historical perspective and tracking the development of international human rights legislation to include problems of sexuality and gender. It highlights the ongoing difficulties in putting these rights into practise internationally while also recognising the progress achieved in recognising the rights of LGBTQ+ people and other sexual minorities. This chapter also explores how social views and cultural norms affect the realisation of sexual rights. It examines how deeply rooted stigmas and biases may encourage discrimination, violence, and social exclusion of sexual minorities. The research emphasises the significance of dispelling these false notions in order to foster an atmosphere that is more tolerant and inclusive of all people.

#### KEYWORDS:

Constitution, Freedom, Gender, Health, Sexuality.

#### INTRODUCTION

In the long history of mankind and its creation, in the spread of the human race, and in the global social economy, woman has been a force as significant as man, yet she has always been considered as inferior and subordinate. She is regarded as the parent, spouse, or wife of the male. She is seen as a product or a slave. Theological leaders, philosophers, social reformers, and scientists have all offered various theological, biological, and psychological justifications for the lower position at various ages. Societies that limit female responsibilities to being a wife, mother, and daughter have restricted her tasks to those of sexual, reproductive, economic, and educational. History shows that both men and women have attempted to emancipate women via a variety of religious and social organisations at various eras. In the course of its history, India has also seen a number of social reform movements for the liberation of women, particularly in the late 19th and early 20th centuries. The inferior status has not altered in spite of the gender rules in the Constitution and other social laws.

This is due to the fact that their psycho-social realities have not altered. So much so that they have reinforced gender dichotomies and been an obstacle to change. Women are still raised with

the idea that getting married, obeying the husband, and having children is the ultimate purpose of life. Due to this, female functions are reduced to those related to her:

1. Sexuality.
2. Reproduction.
3. Economic productivity.

This causes her life to revolve around other people and to be related to them via her natal family before marriage, her marital family after marriage, and her borne offspring. In other words, a woman's existence depends on her ability to connect psychologically and experimentally with other human lives. It is here that she needs empowerment because she lives among these people, not because she fears their annihilating her, but because she fears being isolated from and separated from the human community that she relies on and that depends on her. Unfortunately, sexuality is a private sector concern and is not pertinent to the public or political realm, which is bad news for the liberal western heritage of law. However, radical feminists believe that as long as sexuality-related problems are not addressed, women's subjugation will continue[1], [2].

### **Indian women's sexual rights**

An essential component of being human is sexuality. To demand and get sustainable development for their sexual and reproductive rights, women and girls must have equality, authority, and resources. They must be capable of making decisions that have an impact on their bodies and lives, such as deciding when and with whom to engage in sexual activity, deciding whether or not to marry, considering whether or not to have children, and deciding whether or not to use health information and other services. No of what decisions we make, we must not experience abuse, discrimination, or rejection. At the 14th World Congress of Sexology, the WAS endorsed a Universal Declaration of Sexual Rights, which outlines 11 sexual rights:

1. The rights to sexual autonomy, sexual integrity, and safety of the sexual body.
2. The entitlement to personal sexual space.
3. The privilege of gender equality.
4. The right to enjoy one's sexuality.
5. The freedom to express one's sexuality emotionally.
6. The freedom to engage in open sexual relations
7. The freedom to make informed reproductive decisions.
8. The right to sexual information supported by research.
9. The entitlement to thorough sexuality education.
10. The right to a healthy sexual relationship.

In terms of sexuality, sexual fitness refers to one's physical, mental, emotional, and social health. It includes contraception, protection from sexually transmitted diseases aspects of which are also a part of reproductive health, protection from sexual harassment and abuse, and the ability to have fulfilling and healthy sexual experiences. By examining its linkages to intricate thematic human rights domains, sexual fitness has gained more attention throughout time. Through consensus papers, well-known feedback from treaty bodies, the work of unique mechanisms and UN resolutions, the World Health Organisation (WHO), and the 2030 Sustainable Development Goals, this section tracks the expansion of the perception of sexual fitness within human rights and development[3], [4].

## The Indian Constitution and Human Rights

Basic human rights were included into the Constitution because of the constitution's authors' strong concern for the protection of human rights in light of the nation's socioeconomic and political history. The Indian Constitution's preamble outlines the goals of ensuring freedom of thought, speech, belief, religion, and worship equality of status and opportunity for all citizens; justice; social, economic, and political rights and fostering fraternity among them while preserving the dignity of the individual and the unity of the country. The establishment of a welfare state was the goal of the Constitution's creators. The Constitution simultaneously prioritises the individual and makes an effort to balance their interests with the overriding needs of the society. The Indian constitution's inclusion of a chapter on basic rights is consistent with the current democratic thought trend. The idea behind this inclusion is that a free society requires that some basic human rights be protected from interference by the state. The formal statement of basic rights that India has enshrined into its Constitution is unaffected by any legislative save to the degree and under the circumstances specified by the constitution. The following subheadings are used to categories FRs under the Indian Constitution:

1. Equal rights (Articles 14–18).
2. Freedom of expression (Articles 19–22).
3. The right not to be exploited (Articles 23–24).
4. The freedom to practice one's faith (Articles 25–28).
5. Rights related to culture and education (Articles 29–30).
6. Property rights (Article 31).
7. The right to legal recourse (Articles 32–35).

All legislation that violates basic rights are prohibited under Article 13 and are thus null and invalid. Additionally, it declares that any law drafted by the State that restricts the rights guaranteed by Part III is invalid. This provision is applicable to both existing laws and future legislation.

## Rights Analysis from a Gender Perspective

Women's rights denial is a widespread practise that transcends national boundaries. Undoubtedly, all facets of the community, particularly the weaker members, are impacted by a failure to comprehend even the most basic rights to existence. However, it must not be forgotten that as long as men and women adhere to gender roles, the historically ingrained notions of rights instilled in them deny women even their claims to equality, making them the bearers of weaker rights. There is abundantly clear data available today to prove that women face discrimination and are deprived of their basic rights to survival, access to resources, and ownership of their output. In the end, the gender socialisation process may violate basic human rights since it attempts to control women's autonomy and their dependence on thought and action.

They become meek, docile, and subservient as a result. Such a mindset becomes embedded inside more overt forms of denial, at which point women's rights continue to be an alien notion that must be realised. The prevalent bias labels women as the other and ignores them. Such prejudice often manifests as violence. Women's rights violations have two effects. At one point, it continues to justify their subjugation by enhancing the negative stereotypes of the women. These crimes attempt to demonstrate the links of power between men and women and are not isolated anomalies [5], [6]. Feminism has criticised women as being detrimental to



contemporary socio-political theories because it is concerned with the nature of power and how it affects gender ratios. They have been able to switch the primary focus of the examination from men's point of view to women's point of view thanks to research that has helped them identify gender blindness within prevalent beliefs. Due to the emphasis placed on knowledge's experience base, great theories and universal formulations have been abandoned.

On the other hand, the appropriate argument, which mostly overlaps liberal political philosophy, ethical theories, and legal theories, is based on the assumption that knowledge is objective and that the knower exists outside of the knowable. Therefore, it is assumed that there is a right to exist apart from the materiality of people's lives, which may be attained via conscious decision. Due to the limitations on women's lives, such assertions of neutrality within the epistemology of rights in feminist theories are becoming problematic. The ensuing discussions on the construction of rights and the ideas of empowerment have brought up a number of other, equally legitimate issues. Questions are raised about the foundation for the distribution of rights after analysing the traits of masculinity and femininity.<sup>15</sup>The First-wave feminist movement of the late nineteenth and early twentieth centuries did not contest the notion of justice as the basis on which men fought for their rights. They just said that because women could also reason logically, they had equal rights. They emphasised the need of education as a way to cultivate reason so that women may realise their rights in their action plan[7], [8].

## DISCUSSION

Over the last 20 years, efforts to advance the theories and tactics of sexuality and human rights have been evolving. A process of attempting to better understand sexuality in the context of human rights has been actively started and taken part in by a broad variety of organisations involved in a number of causes that often overlap such as women's health, human rights, anti-violence, and reproductive. The following bibliography serves as an illustration of the breadth of topics covered under the umbrella of sexual rights/sexuality and human rights. A person's sexual subjectivity in society is seen as being made up of their sexual identity and orientation, gender identity, sexual desires, and sexual behaviours. Of course, one's social position and, in particular, one's experiences with race, class, culture, and community have an impact on one's sexuality. The majority of the publications included in this bibliography make the case that a particular cultural, material, socioeconomic, and political environment has an impact on how we see our bodies and ourselves. The connection that peoples have with their sexuality may change throughout time since sexuality is also flexible and adaptable. The choices also show that trapping sex for study is neither easy nor simple since lobbying connected to sexuality may also be dynamic.

Even though the goal of this bibliography is to collect works on sexuality and rights, the focus here is mostly on women's sexuality and rights. This is an accurate depiction of the literature, which mostly ignores sexuality and rights for all sexes, except situations involving HIV/AIDS and sexual orientation. These problems have been brought up in conversations regarding sexual orientation, women's reproductive rights, and human rights in international political forums. People who disagree with the affirmation of women's human rights to sexuality often express their opposition to the freedom to choose one's sexual partner and to conceive a family in a number of ways. Frequently, sexism and homophobia work together to limit sexual rights. According to many conservatives, religious right, or fundamentalist actors, granting women the rights to physical integrity, autonomy, and the capacity to decide for themselves whether or not

to have children might lead to the family, the community, and even the state imploding. Given continuing gender-insensitive methods to HIV education, prevention, treatment, and care, the HIV/AIDS pandemic has led to increased attention to sexual health in general, albeit not necessarily to women's sexual health. However, the epidemic is pushing open and honest debates about sexuality to the front of activist and policy discussions. Sex itself has entered the public discourse in ways that were unthinkable twenty years ago for activists, educators, policymakers, and the general public. When else would UN representatives and country delegations to conferences find themselves debating whether to provide contraceptives to children or men who have sex with men?

These initiatives concerning sexual orientation, gender identity, HIV/AIDS, reproductive rights, and other rights are at the foundation of this bibliography. The many references in the field of reproductive rights show how important problems of sexuality and rights have become in recent years when it comes to reproduction. This is not to imply that other fields of work do not address similar difficulties, but rather to provide an explanation for the disproportionately higher number of references. The purpose of the bibliography is to provide a summary of the literature for people who are interested in the topics of sexuality and human rights. It is meant to both ask important questions to the field and to aid in their answers. It is targeted at providing context for discussions that are developing from this effort. What do we mean by sexual rights in reality? Does a specific group of rights exist that may be grouped together under the heading of sexual rights? Is this a wise strategic move, even if one could establish the conceptual argument for such a unique set of rights? Would it be preferable to keep the definitions vague and open to several interpretations instead? What are the advantages and disadvantages of creating fixed definitions, in other words? What position does sexuality have in the context of human rights? The human rights framework: is it too restrictive? What effects do these conceptual disagreements have on the activist coalitions and strategies?

When these objectives are frequently presented as being in opposition to one another, how can we both protect women and respect culture? How can we discuss sexuality in public without drawing attention to ourselves or risking abuse or violence? And how can we overcome the burden of procreation to seize valid territory for sexuality-related advocacy? Although it is obvious that working on sexual rights presents a variety of challenges both conceptually and practically, many organisations underline the significance, in fact, the benefit, of participating in this discourse and producing clearer and more useful theories, methods, and approaches. The solutions to the problems could continue to elude us. However, the investigation will undoubtedly be crucial for advancing advocacy and action. An introduction to the subject of sexual rights/sexuality and human rights is intended by the entries below. This bibliography is a collection of various, related studies rather than a full list of everything that has been written on the subject. While some articles provide a general overview, others go into further detail on particular sexuality and human rights topics. Two parts make up the bibliography [9], [10].

In the first, there are annotated entries with succinct summaries. The entries in this section are divided into two groups: those that offer general reflections on sexuality and human rights concepts and practices, and those that concentrate on more particular aspects of sexuality and human rights. They provide an overview of the major issues in current work on sexual rights, sexuality, and human rights. For individuals who wish to go further into certain fields of study, the second section, which is organised thematically, offers citations to additional chosen articles, essays, and books. The following criteria were used for choosing contributions:

1. It has a substantive emphasis on sexuality and human rights, or makes a clear allusion to both.
2. It improves awareness of the key concerns.
3. It provides thematic coverage of a specific, pertinent subject.
4. It contributes to geographic coverage.

Although not all points of view and viewpoints are equally covered, this bibliography aims to provide as wide a range as possible, especially in terms of thematic viewpoints. The North American sources are overrepresented, and future revisions of this bibliography will kindly take into account adding any new information that readers bring to our notice. Additionally, all of the reference articles are in English owing to different restrictions. To inspire additional research, we have selected a very small selection of Spanish-language works on sexual rights. For future additions to the bibliography, kindly contact the author any further suggestions in English, Spanish, or French[11], [12].

### CONCLUSION

The importance of legal frameworks in defending sexual rights is also covered in the research. Examining topics including decriminalizing consenting same-sex relationships, gaining access to healthcare, and being protected from discrimination, it looks at how laws and policies may either protect or violate the rights of sexual minorities. The chapter emphasises the significance of thorough legal safeguards to guarantee that everyone may fully use their sexual rights. It explores the connections between the advancement of sexual rights and other essential freedoms including the right to privacy, the freedom of speech, and access to healthcare and education. In order to address the particular difficulties encountered by various marginalized populations, the research emphasises the necessity for an intersectional approach to human rights activism. In summary, this chapter emphasises how crucial it is to include sexuality in the larger conversation about human rights. Societies may endeavour to prevent discrimination and violence based on sexual orientation and gender identity by acknowledging sexual rights as a fundamental component of human dignity and autonomy. The chapter makes a plea for a more inclusive and thorough framework for advocacy and protection, with the goal of ensuring that every person's rights and welfare, regardless of sexual orientation, are completely recognised and preserved.

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## CHAPTER 19

### Exploring Sexual Health, Prosperity and Well-Being: An Introduction

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#### ABSTRACT:

The burgeoning field of sexual health, wealth, and well-being is reviewed in this chapter, with an emphasis on its importance in fostering all-encompassing, integrative viewpoints on people's sexual lives and general quality of life. It examines the multifaceted nature of sexual health and wellbeing, taking into account its psychological, social, emotional, and physical aspects. The research intends to highlight the significance of prioritizing sexual well-being as a basic human right and a major element of individual and society thriving by studying the connections between sexual health and general prosperity. Beginning with a definition of sexual health and well-being, the chapter acknowledges the notions' dynamic character as they take into account various cultural, societal, and personal settings. While sexual well-being refers to a happy and rewarding sexual experience that respects one's own rights and beliefs, sexual health is considered as a condition of physical, emotional, mental, and social well-being in connection to sexuality. This chapter also explores the crucial part that sexual health plays in promoting general prosperity and wellbeing. It looks at how having a good sexual experience may increase one's sense of self-worth, acceptance of one's body, and emotional closeness in relationships, all of which improve one's quality of life in general. The research also emphasises the significance of encouraging sexual well-being and prosperity on a social level via the eradication of stigma, access to comprehensive healthcare, and sexual health education.

#### KEYWORDS:

Education, Gender, Sexual Health, Prosperity, Well-Being.

#### INTRODUCTION

With its origins in the right to health, sexual health and wellbeing referred to as sexual health in this report is acknowledged as an essential component of human rights. In the past two decades, sexual health first recognised in conjunction with reproductive health has developed into a separate thematic area that includes physical, psychological, social, and epidemiological aspects of sexuality as well as the connections between each of these aspects and the physical and social contexts that affect access to, experiences with, and health outcomes for various population groups. The enjoyment of sexual health is therefore a component of the right to health, which is interdependent with and inextricably related to the realisation of other human rights.

The addition of the word wellbeing to the definition of sexual health indicates that its scope extends beyond the detection and treatment of illness to encompass features of sexuality's autonomy and enjoyment.

### **Goals, Purpose, and Limitations of the Study**

This study, which serves as a first national investigation, aims to expand on the top issues required for the fulfilment of sexual health in the context of India. The NHRC's decision to commission a study on human rights issues connected to sexual health is significant since it acknowledges domestic concerns.

It marks the beginning of a process that may include a variety of activities, such as raising awareness, setting up multi-stakeholder dialogues, monitoring, developing recommendations and guiding notes for ministries and agencies, including for legislative change and pursuing accountability[1], [2]. The study's main objective, being the first of its kind in the area of sexual health, has been to map out the most important or pressing issues in India.

Although a more extensive coverage of sexual health was made possible by choosing two independent reports on sexual and reproductive health, the coverage under the current conditions is still far from complete. The companion study addresses overlapping issues linked to reproductive health, however this article only focuses on sexual health. As a result, in order to fully comprehend the interaction and overlap between the two companion domains, this study must inevitably be read in conjunction with and informed by the report on reproductive health and well-being.

### **Methodology**

Interviews with members of the civil society who deal with the impacted demographic groups, desk research on the legislation, journal papers, press stories, and other resources, as well as policy experts were all used in the investigation. Discussions led to the discovery of the most important aspects of sexual health, and the evaluation was informed by secondary source analysis, reports, and interviews. By doing desk research on reports from expert agencies, UN human rights procedures, including treaty bodies and UN Special Rapporteurs, the foundation for sexual health under international human rights legislation was outlined.

The desk study included looking at the domestic framework, court decisions from India, policies, projects, and programmes that have a direct or indirect relationship to the concerns, as well as other relevant information. Field trips to Chennai and Kolkata, respectively, made it possible to conduct stakeholder interviews and gain insight from their interactions with a variety of population groups, including sex workers, women and people living with HIV, women with disabilities, trans and queer/LGBI communities, and women.

During the civil society consultations organised by Partners for Law in Development to prepare a joint-stakeholder report on gender equality for India's third UPR in August-September 2016, interviews with important stakeholders were also conducted. Some of the contributions made during this consultation were submitted by email, while others were made during the meeting that was called specifically for that reason. Some of the interviews were placed over the phone. Where appropriate, civil society inputs for India's third UPR were also consulted in determining the extent to which India complied with human rights relating to sexual health.

As Annexure C, there is a list of the groups and people that were contacted, as well as a list of reviewers who specialise in particular areas. The draught versions were sent out to a small group of specialists for advice and feedback, however not all of them have yet been received. It is



advised that this report be presented for debate in an expert group meeting called by the NHRC in order to foster discussion and suggestions that will help the report be completed[3], [4].

## DISCUSSION

### Structure

The study is organised into seven parts; after an introduction, the second chapter describes the range of sexual health issues, identifies the human rights framework, and lists the four criteria used to evaluate sexual health in India. The evaluation of important factors relating to sexual health is organised according to chapters. Each of these chapters provides an overview of the importance of the main issue, outlines the applicable human rights standards based on the Constitution and legal framework, and, where appropriate, details programme interventions. This is followed by a critical discussion of the gaps and the problems these present both generally and for particular population groups. Each of these chapters ends with a list of suggestions. The suggestions from all the chapters are compiled in the seventh and final chapter. This nation evaluation is based on the following four major aspects of sexual health and human rights:

1. Access to sexual health treatments is equitable and free from discrimination.
2. Information and knowledge to exercise choice-making in order to engage in pleasurable, safe sexual interactions.
3. HIV/AIDS and STI prevention.
4. prevention of sexual assault and control over one's own sexuality.

Without discussing abortion and contraception, sexual health cannot be properly understood. They do, however, pose issues with both sexual and reproductive health rights. Given the overlap between the issues of sexual and reproductive health, Sama Resource Group for Women and Health's companion study on reproductive health rights includes in-depth discussions of both contraception and abortion. The studies on sexual and reproductive health that PLD and Sama, respectively, conducted for the NHRC are meant to be read together[5], [6].

In terms of physical, emotional, psychological, and social well-being in relation to sexuality, sexual health includes the ability to have pleasurable and safe sexual experiences as well as control over fertility and protection from sexually transmitted diseases aspects that are also a part of reproductive health. Through the acknowledgment of its linkages to other human rights subject areas, the definition of sexual health has changed through time. Through consensus documents, general comments of treaty bodies, the work of special mechanisms and UN resolutions, the World Health Organisation (WHO), and the 2030 Sustainable Development Goals, this section traces the expansion in the understanding of sexual health within human rights and development.

The notion of sexual health has changed throughout time. The first time sexual health was mentioned was in the Cairo, 1994, International Conference on Population and Development (ICPD) Programme for Action, which stated that reproductive health also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases.<sup>1</sup> It continued, People can have a fulfilling and safe sexual life, and they have the potential to reproduce and the choice to choose if, when, and how often to do so. The rights of men and women to information

and access to the family planning techniques of their choice that are safe, effective, inexpensive, and acceptable are implicit in the final requirement.

The Fourth World Conference on Women in 1995 specifically addressed sexual health as a component of sexuality and recognised women's autonomy in this regard: The human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free from coercion, discrimination, and violence. These early definitions established that sexual health included the availability, accessibility, acceptability and quality of information, knowledge, and services, to enable making informed decisions for satisfying and safe sex. Sexual health was also established to be related to sexuality, sexual relations, including but also independent of reproduction and disease prevention. An important development was the recognition of sexual health as a component of women's rights and gender equality [7], [8].

The General Comment 14 (2000) of the Committee on Economic, Social, and Cultural Rights (CESCR) describes the responsibilities of the state with regard to sexual and reproductive health. It states the need to develop and implement a comprehensive national strategy for promoting women's right to health throughout their life span include interventions aimed at the prevention and treatment of diseases affecting women including sexual and reproductive health services and affirms that these are a part of the right to the highest attainable standard of health (Article 12). It explains that the state's obligations in this situation are to take measures to protect in particular women, children, adolescents, and older persons, in light of gender-based expressions of violence, as well as to ensure that harmful social or traditional practises do not interfere with access to pre- and post-natal care and family planning. It additionally urges States to desist from restricting access to contraceptives and other methods of preserving sexual and reproductive health, as well as from censoring, withholding, or purposefully misleading information about health, especially that relating to sexual education and information. As with the right to health, the CESCR acknowledges that underlying material and social variables that differ between demographic groups, rural-urban settings, geographies, and cultures influence sexual health outcomes (and reproductive health, as well).

### **Factors that affect sexual health**

The physical circumstances that affect (sexual) health include access to safe and potable water, adequate sanitation, adequate food and nutrition, adequate housing, safe and healthy working conditions and environment, and health-related education and information. Social determinants are societal norms and systems that marginalize, oppress, or stigmatize people based on their sex, marital status, age, ability, caste, race, or position as a member of a minority, in addition to their sexual orientation or gender identity. As a consequence, these demographic groups' vulnerability and health outcomes are heavily reliant on legal protection against abuse, torture, and discrimination. The right to sexual and reproductive health is an essential part of the right to health and is interdependent with the realization of all other human rights, as stated by the CESCR.

Sexual health, according to the World Health Organisation, is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction, or infirmity. A positive and respectful view of sexuality and sexual relationships is necessary for sexual health, as is the ability to have joyful and secure sexual encounters free from compulsion, prejudice, and violence. All people's sexual rights must be recognised,

defended, and upheld if sexual health is to be gained and maintained. The WHO (2010) defined sexual health, and there is now increasing agreement that this definition include connections to good sexuality, sexual relationships, and sexual rights[9], [10].

The satisfaction of sexual health is significantly influenced by sexuality since it determines sexual health outcomes for individuals in all of its complexity. The WHO has suggested the following working definition of sexuality: Sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy, and reproduction are all fundamental aspects of what it means to be human. In thoughts, fantasies, wants, beliefs, attitudes, values, actions, practises, roles, and relationships, sexuality is experienced and expressed. All of these aspects of sexuality are there, but not all of them are constantly felt or expressed. Interactions between biological, psychological, social, economic, political, cultural, legal, historical, religious, and spiritual elements have an impact on sexuality.

### **Relationships between sexual health and development and human rights**

Different theme treaty organisations and specific mechanisms have confirmed and enlarged on the intersections and links between the topic sectors of sexual health. The interconnected web of sexual health rights includes the accessibility to sexuality education, information, and health services that are age-appropriate, scientifically correct, as well as the prevention and treatment of illnesses including HIV/AIDS and sexually transmitted infections (STI). Additionally, it respects the needs of people with disabilities, gender-based violence prevention, and the developing capabilities of teenagers. The 2030 Sustainable Development Goals (SDGs) for health, education, and gender equality have been acknowledged as being inextricably linked to the attainment of sexual health.

In order to enable self-awareness and reproductive autonomy, prevent gender-based violence, and encourage responsible sexual behaviour, it is important for women, children, and disabled people to have access to age-appropriate comprehensive sexuality education and information that covers a wide range of issues. Indicators like access to and use of contraception, the availability, usability, and acceptability of high-quality sexual and reproductive health (SRH) services, knowledge of SRHR, adolescent fertility, healthcare quality, STI prevention, and abortion are all mandated by the SDGs. They also call for the inclusion of sexual health services in national strategies and programmes. It has been acknowledged that there are connections between the implementation of education programmes and informational campaigns, and the use of skilled medical workers to provide SRH services, in preventing STIs. The criminalization of HIV non-disclosure, consent-based sexual behavior, transgender identities, and consequently, the criminalization of SRH services and information on the prevention and treatment of HIV AIDS and STIs, as well as the right to sexual health, has both indirect and direct negative effects.

International human rights legislation has defined sexual violence against girls and women as a severe form of gender-based discrimination with serious ramifications for physical, emotional, mental, and social wellbeing. The number of people who experience gender-based violence who are not women is rising. These include children, people who identify as non-binary or non-heterosexual, people with disabilities, people in unstable relationships, and people with lower socioeconomic statuses. A wide definition of sexual assault has been required because of its many expressions and forms. Recognising that social and economic inequality, poverty, and unmet fundamental requirements are obstacles to the fulfilment of rights, it is important to note

that sexual health is reliant on the fulfilment of equality and the absence of discrimination, especially with regard to marginalized or stigmatised population groups.

International law has recognised the importance of non-discrimination in access to health services, education, and information for the realization of sexual health rights of all people, including adolescents, people living with HIV/AIDS, people living with disabilities, women, and children. Framework for this study's evaluation of sexual health. This study will look at compliance with and gaps in respect to the following aspects of sexual health in the context of India in light of the range of sexual health covered above. There are bullet points next to each component that list the important details. Easy access to education and knowledge. Provide age-appropriate, comprehensive sexuality education to all demographic groups both within and outside of the official school environment, without parental approval and regardless of marital status. This education should also include accessible, comprehensible health information. Ensure that teenagers are given complete information on SRH, including contraception, family planning, STIs, including HIV/AIDS, and the risks of unplanned pregnancies.

Medical Services. Remove any legal or policy barriers to the provision of a full range of high-quality sexual and reproductive health care services and information to all, especially vulnerable groups like adolescents, people with disabilities, and those who identify as non-conforming in terms of gender identity and sexual orientation. Forbid discrimination in health care access based on factors such as gender, age, handicap, race, religion, nationality, economic position, sexual orientation, health condition, including HIV, etc. Control of STIs, HIV, and AIDS. Create initiatives for education and prevention, as well as publicity campaigns, to address STIs, notably HIV/AIDS and other SRH problems. Make sure there are no obstacles, either indirect or direct, to the realisation of SRH, such as criminalising SRH services and information, HIV non-disclosure, STI exposure and transmission, criminalising consensual sexual activities between adults, sex work, and transgender identity and expression[9], [11].

Control of sexual autonomy and defence against sexual assault. Make all kinds and expressions of non-consensual sexual contact illegal, and take the appropriate precautions to stop, look into, and punish sexual assault or violence based on sexuality, whether it is done by state or non-state actors. Offer all demographic groups complete reparative justice for sexual assault, effective remedies, and a process for requesting restitution. Recognise that people with non-confirming sexual orientations and gender identities have the legal right to have consensual sexual interactions, including teenagers in line with their developing capabilities.

## CONCLUSION

The difficulties and hindrances to sexual health and wellbeing for different people and cultures. It recognises the influence of social norms, cultural taboos, and discriminatory practises that may result in breaches of sexual rights and prevent everyone from experiencing complete sexual health and well-being. To address these issues and promote sexual success for everyone, the research emphasises the need for comprehensive sexual health policy, inclusion, and diversity-sensitive methods. The possibility for incorporating sexual health and wellbeing into larger development priorities is also explored in this chapter. It explores how putting sexual rights and inclusion first may help the world achieve the Sustainable Development Goals, which include gender equality, reducing inequality, and enhancing everyone's health and wellbeing. This conclusion emphasises the significance of sexual health and wellbeing as essential elements of human prosperity and general well-being. Societies may build circumstances that support sexual

rights, healthy sexual experiences, and general growth for people and communities by recognising the multiple dimensions of sexual health and supporting inclusive and comprehensive methods. The chapter is a call to action for academics, decision-makers, and activists to prioritise sexual health and prosperity as essential human rights and key elements of creating a more equitable, inclusive, and successful society for everyone.

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## CHAPTER 20

### Non-Discrimination and Equality: Sexual Health Services

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#### ABSTRACT:

This chapter critically explores the crucial role that equality and non-discrimination play in ensuring that everyone has access to sexual health treatments, regardless of their sexual orientation, gender identity, or socioeconomic status. It looks at how stigma, discriminatory acts, and social prejudices might function as obstacles to vital sexual health care, placing disadvantaged people at higher risk of negative health consequences. This research uses an analysis of the human rights framework to emphasise how important it is to advance equality and non-discrimination as fundamental principles in expanding comprehensive and inclusive sexual health care. Beginning with a definition of sexual health services and a discussion of their importance in preserving people's physical, mental, and social well-being, the chapter sets the stage. The relationship between sexual health, human rights, and overall health outcomes is discussed, highlighting the necessity for comprehensive and inclusive sexual health treatment to advance public health. The problems and obstacles that marginalised groups have while trying to obtain services for sexual health are also included in this chapter. It looks at how societal stigma, discriminatory legislation and regulations, and a lack of treatment that is culturally competent may result in LGBTQ+ persons, sex workers, people with disabilities, and other vulnerable groups having insufficient or limited access to sexual health services. The chapter highlights how crucial it is to provide secure, encouraging settings that uphold people's rights to autonomy and well-informed decision-making.

#### KEYWORDS:

Equality, Health, Non-Discrimination, Sexual, Services.

#### INTRODUCTION

Sexual and reproductive health (SRH) services must be accessible, acceptable, and of high quality (AAHQ) according to international human rights standards.<sup>30</sup> States must make sure that there are enough health care facilities, programmes, services, and supplies available to serve the whole population in both rural and urban settings, and that everyone can use these services, particularly the poor and the most disadvantaged. This involves information accessibility individuals and organisations should be able to explore and disseminate SRH concerns without any obstacles, economic accessibility services, both private and public, should be accessible for everybody, and physical accessibility within safe and acceptable distance. Acceptability guarantees that the range of population variety in terms of culture, race, gender, age, sexual orientation, and other distinctions is respected. Additionally, service providers should uphold the medical ethics of informed consent and confidentiality. Last but not least, all healthcare products and services need to be provided with quality.



The CESCR General Comment 14 (2000) on the right to health highlights the significance of non-discrimination in enabling access to health services, pointing out in this context the social and legal barriers that obstruct access for adolescents, people living with HIV/AIDS, people living with disabilities, women, and children, thus increasing their vulnerability. The governments' need to provide comprehensive information to adolescents on SRH, including contraception, family planning, STIs, including HIV/AIDS, and the risks of early pregnancy is particularly outlined in CESCR General Comment 22 (2016). In addition, it states that teenagers should be provided this information while respecting their privacy and confidentiality, regardless of their marital status or parental approval. Notably, it acknowledges the susceptibility of disadvantaged groups, such as impoverished women, people with disabilities, ethnic and indigenous minorities, LGBTI youth, and people living with HIV/AIDS, to obtaining SRH[1], [2].

Their ability to get healthcare is greatly hampered by the criminalization of certain behaviours, such as non-penovaginal sex without permission, and specific populations, such as sex workers and homosexuals. To allow persons who are susceptible to HIV/AIDS and other sexually transmitted illnesses to obtain medical treatment and actively engage in health initiatives, the Special Rapporteur on the Right to Health devotes an entire report<sup>31</sup> to the necessity to decriminalise such acts. Criminalization is known to push issues underground, leave the people at risk for abuse, and compel them to remain silent. Since vulnerable populations' access to prevention and treatment is a major problem, this section will briefly describe how stigma and criminalization in India make certain demographic groups more susceptible and keep them from receiving sexual health treatments. Although each of these groups is stigmatised and, to some extent, criminalised, the experiences of these groups vary and are differentiated due to factors such as class/economic status, caste, tribal affiliation, and HIV status (HIV positive individuals within each vulnerable group experience an increased level of vulnerability and marginalisation).

### **Transgender Individuals**

Transgender people had the second-highest incidence of HIV prevalence among high-risk categories, according to the National AIDS Control Organisation (NACO), in 2015–16, at 8.82%.<sup>33</sup> This is a result of the many obstacles that trans people must overcome to get both public and private sexual health care. Access to sexual and general health treatments is severely hampered by stigma and prejudice that are unique to transgender people as well as by traditional norms and beliefs within the trans community. When the few do use these services, they encounter a series of injustices and humiliating treatment meant to penalise individuals who seek medical attention. A trans person must deal with four different sorts of assault in a government hospital. The first is from the Group D employees, who will observe you and remark. After that, the ticket counter employee would not fully listen to your name because they want to intimidate you. The nurse will then approach you, make a face, and ask the doctor which ward to place the patient in. The doctor will eventually arrive after realising you are a trans person and taking one look at you.

Member of the West Bengal Transgender Welfare Board and a transgender rights advocate. Police often utilise Section 377 of the Indian Penal Code, the Immoral Trafficking Prevention Act (ITPA), public nuisance, and anti-begging laws to harass trans persons, particularly those engaged in sex trade and begging. Their susceptibility to poverty, which in turn worsens their susceptibility to obtaining HIV and other STIs, is increased by criminalization and stigma. Due

to a lack of alternative career opportunities, trans persons are often compelled to do dangerous sex work. It is not unexpected that individuals are wary of evaluating sexual health treatments in hospitals or health centers given that stigma, humiliating behavior, and harassment are common occurrences. Other under-addressed concerns affecting trans communities, such as Sex Relocation Surgery (SRS) and other gender affirming operations like endocrine therapy, are low on the official priority list yet are crucial for the general wellbeing of trans persons. While certain governments, like Tamil Nadu, have created provisions to provide free SRS procedures to trans women, there is no comprehensive national policy on the subject, nor are similar services available to transgender males in the states where trans women have such provisions.

Since 'emasculatation' is within the ambit of Section 320 of the Indian Penal Code, which defines 'grievous pain,' some physicians have been accused with criminal crimes for conducting this procedure due to the lack of a national policy and uncertainty concerning the legality of SRS. Few physicians have the necessary skills, which has caused medical negligence and driven up operation costs. According to studies, trans PLHIV may self-administer SRS hormones due to the expensive expense of SRS without telling their doctor prescribing anti-retroviral treatment (ART) medicine, putting them at risk for liver and kidney damage due to interactions between the two classes of medications. Government hospital doctors may be quite callous and cruel. They are unaware of their moral obligations. Therefore, I think HIV intervention won't be successful. Some of them use transgender people as test subjects. To test the effectiveness, they administer various medication combinations to various transgender individuals[3], [4].

## DISCUSSION

### **Transgender Welfare Board member and advocate for transgender rights**

In *NALSA v. Union of India* in 2014, the Supreme Court upheld the equality of trans people, recognising the right to self-determination of gender regardless of SRS and other gender affirming practises, and requiring the state to provide protection and welfare, including through affirmative action (as part of constitutionally recognised Other Backward Classes). However, since this historic judgement came so soon after the Supreme Court had reinstated the criminalization of homosexuality in 2013, its impact was reduced because, despite the *NALSA* decision's guarantee of non-discrimination, the sexual orientation of an entire demographic group remained criminalized. Nevertheless, as a step forward, states like Odisha, Manipur, Kerala, Maharashtra, Chandigarh, and Chhattisgarh have developed welfare policies and programmes for transgender people. These include HIV zero-surveillance clinics and free SRS facilities at a few government hospitals that cater to trans people's sexual health requirements. After completing a study to identify the problems faced by transgender individuals in the state, Kerala is the first state to have put into place an extensive transgender policy.

The 2016 Transgender Persons Protection of Rights Bill, passed by the federal government, does not adhere to the favorable ruling in *NALSA*. For the aim of recognising a person's trans identity, the Bill specifies the creation of a District Screening Committee, which would comprise a medical officer and a psychiatrist. The measure forbids the self-determination of gender identity by requiring a medical examination; instead, it pathologizes it and turns gender identity into a subject of external validation through District Screening Committees, panels of which include medical offices. Even as it criminalises the customary support networks and ways of living connected to the lived reality of transgender persons, the Bill fails to recommend positive action to eliminate historical prejudice and exploitation. The law suggests rehabilitation as a

framework, which is unacceptable to the transgender and intersex groups, rather than adopting a rights-based approach to undo entrenched prejudice. After receiving harsh criticism, the Bill was sent to a Parliamentary Standing Committee, which has taken notice of these flaws seriously. The Committee report criticises the bill's silence on the need for career services, marriage and adoption recognition, HIV sero-surveillance units, and reservations for trans individuals in government organisations.

The report of the committee also discusses the need of enacting anti-discrimination laws to protect trans individuals from mistreatment in hospitals, schools, and other settings. The right of transgender people to self-identify as male, female, or third-gender is another crucial gap in the Bill that is in violation of the Supreme Court's NALSA ruling, but it is not addressed in the Standing Committee report. As a result of receiving medical training that is centred on the binary sex-gender paradigm, the majority of clinicians are unable to treat trans bodies. There have been tales of physicians refusing to touch trans patients or asking them to undress so they may show off their bodies as human specimens to their peers. Despite some policy-level improvements, the de facto contact of a trans person with the healthcare system continues to be humiliating, creating a significant barrier to getting assistance [5], [6].

### **Bisexual, lesbian, and homosexual people**

People who identify as lesbian, gay, or bisexual (LGB) experience stigma and prejudice while seeking out sexual health care. This results from stigmatised sexual practises involving LGB people as well as cultural and social views.

The IPC's Section 377, which makes acts against the order of nature illegal, has often been used to intimidate, threaten, and blackmail the society. Lord Macaulay, who served as the first law commission's chairman, introduced this colonial statute into the Indian criminal justice system. Its beginnings may be seen in Henry VIII's 1533 Buggery Act, which outlawed sexual activities regarded as abhorrent by Victorian morality. By adopting the Sexual Offences Act in 1967, the British decriminalised same-sex relationships; nevertheless, a number of former British colonies, notably India, still have this offence listed as a crime in their penal codes. Consensual same-sex relationships are illegal, which feeds the myth that LGB persons are sexually perverse and abnormal.

Despite the high incidence of HIV among men who have sex with men (MSM), this rule poses a significant obstacle to the provision of sexual health education and services in these communities.

The most recent NACO statistics revealed a 4.3% HIV prevalence rate among MSM. The case in Lucknow in 2001 serves as an example of the law's harsh effect on sexual health work and the danger it exposes health professionals to. Two NGOs working on HIV/AIDS among the MSM population, Bharosa Trust and Naz International, were searched by the authorities. Using Section 377, they detained the employees and shuttered the offices.<sup>50</sup> Following the Supreme Court's decision in *Koushal v. Naz Foundation* in December 2013 to once again criminalise homosexuality, there have been claims of an upsurge in harassment, threats, and abuse by family members, police, and medical professionals. Extortion cases have reportedly increased after the *Koushal* ruling, according to sources. According to a survey by the HIV/AIDS Alliance India, 8.3% of the 883 people who participated in their HIV prevention initiative among MSM and trans people experienced prejudice as a result of the restoration of Section 377. Even while a

nine-judge Supreme Court panel ruled that sexual orientation is a basic component of the right to privacy and dignity under Article 21 as well as the right to equality and non-discrimination under Articles 14 and 15, While the Koushal ruling is being challenged before a bigger court, same-sex sexual contact remains illegal under Section 377.

Lesbian and bisexual women suffer twice as much since society does not recognise women's sexuality outside of their reproductive obligations. Lesbian and bisexual women find it exceedingly challenging to receive sexual and reproductive health services since the majority of them are tailored for heterosexual married women. Instead of asking women whether they are sexually active, health professionals more often inquire if they are married. Even unmarried women who seek medical attention run the danger of being embarrassed, subjected to public jeers, or just confused. The condition of lesbian and bisexual women who are not married to males is made worse in this circumstance since it is perilous and challenging to disclose that they do not have a male companion. They experience prejudice as a result of their appearance or clothing. The state indirectly reinforces this prejudice by allocating funds for sexual health under the Reproductive and Child Health (RCH) umbrella. Lesbian and bisexual (LB) women and other unmarried women are not included in this. Public health professionals discussed instances in which single women were penalised for using reproductive services intended for married women exclusively.

In addition, all domestic rules and regulations support a hetero-normative framework for the family and society, making same-sex partnerships undetectable and hence illegal. In addition to making, it difficult for LGB persons to openly express their sexuality, this fosters an atmosphere of fear, shame, and isolation that damages people's self-worth and dignity and is bad for their general wellbeing. The mental health of LGB individuals is significantly impacted by societal prejudice and harassment. In comparison to kids who identify as heterosexual, rates of suicide attempts among teenagers who participate in consensual same-sex behaviour have been found to be between three and seven times higher internationally; the numbers are comparable for adults. Due to prevalent misconceptions that homosexuality is not a mental disorder, LGB persons are reluctant to seek professional help for their mental health problems. There have been instances of mental health professionals and quacks using drugs and electric shock treatments to LGB persons in an effort to modify their orientation and make them heterosexual, despite the Indian Psychiatric Association's guidelines which state that homosexuality is not a mental disease. Conversion therapy is prohibited under the Mental Healthcare Act of 2017, which requires the diagnosis of mental disease to be made in accordance with generally recognised standards. The effect of this Act on LGB people's rights to sexual health, however, is yet unknown [7], [8].

### **Adolescents**

The laws do not accept teenagers as a category of people and do not acknowledge their adolescent sexuality until they are 18 years old, despite the start of puberty in early adolescence and the development of sexual awareness that it brings. All consensual sexual contact involving or with an adolescent is criminalized by the legal protections afforded to child sexual abuse, while in the realm of education, the strong opposition to Comprehensive Sexuality Education and an underqualified teaching staff have only served to reinforce taboos on the topic. The State must be held accountable for failing to respect children's human rights by failing to recognise and support the development of their sexuality-related capabilities. Due to its narrow emphasis and

insufficient resources, the health sector's endeavours to enlighten adolescents and teenagers about their sexual and reproductive rights has had little success.

The burden of HIV/AIDS and other STDs has fallen on children and young people as a result of a lack of knowledge about safe sex practises. According to research, unsafe sex practises in India account for one in four incidences of HIV infection among younger people. A study of teenage females in Maharashtra revealed that 54% of them were unaware of how HIV is spread. This is particularly alarming considering that Maharashtra has one of the worst rates of HIV infection in India yet still forbids sex education in the classroom.

The public health sector in Lucknow severely lacks the infrastructure necessary to offer young people with high-quality sexual health care, according to a youth-led audit of the city's sexual and reproductive health services. When it comes to offering information and assistance on sexual health issues, service providers are both overworked and very conservative. This involves offering services like HIV counselling, emergency contraception, and abortion. When they attempt to use these services, young individuals are often asked intrusive inquiries about their personal lives, such as their marital status and sexual preferences. This not only makes individuals feel humiliated, but it also prevents them from seeking out healthy behaviours.

While the MTP Act requires physicians to keep all information pertaining to abortion cases private, POCSO mandates that any sexual behaviour involving minors be reported to the authorities. Adolescent females who want abortions after having consensual intercourse with their partners are strongly discouraged by this. The obligatory reporting requirement under POCSO violates the ethical need for social workers, medics, and counsellors to maintain client confidentiality. According to service providers surveyed, treating client information as secret or privileged, as was common practice before the passage of POCSO, puts them at danger of breaking the law. Due to this, many experts and service providers are no longer able to provide adolescents including those who are in crisis any kind of sexual health counselling or assistance. Teenagers who live in small towns, rural areas, or who are more marginalized due to their caste, poverty, tribal affiliation, disability, sexual orientation, or gender identity are much less likely to have access to sexual health care.

### **Sexual Agents**

In the context of HIV/AIDS, sex workers are one of the high-risk categories, with a prevalence of 2.2%. The Immoral Trafficking Prohibition Act (ITPA), 1956 makes it illegal to solicit for sex work and to live off the income of a sex worker, even if sex work itself is not illegal in India. This immediately implicates their family members and leaves them open to police persecution. The Ministry of Women and Child (MWCD) recently proposed the Trafficking of Persons Prevention, Protection and Rehabilitation, 2016 Bill, which is based on the ineffective raid-rescue-rehabilitation model for combating trafficking and potentially jeopardises the rights of women who voluntarily choose sex work as a career. This is particularly true in the context of the protective homes covered by the ITPA, where government personnel were discovered to be assaulting women and girls and collaborating with pimps and brothel proprietors.

Brothel raids negatively impact sex workers' sexual health and wellbeing. Sex workers are either forced to flee the scene of the raid or are compelled to go to protection houses. Sex workers are more vulnerable on the streets without the refuge of brothels and its supporting network, where they lack the ability to negotiate the use of condoms with clients or get protection from assault.



They would no longer have access to structured sexual health care without brothels. Sex workers who are forcefully placed in a protection home lose their jobs, are torn away from their families, including small children, and are denied access to health facilities where they may get Antiretroviral Therapy (ART)[9], [10].

Practitioners are concerned about incidents when police have apprehended sex workers while they are out late at night and discovered them to be in possession of condoms. This has a direct impact on their capacity to participate in safe sex behaviours, especially for those who operate as sex workers on the streets or from their homes without being affiliated with a brothel or union. They have an especially hard time bargaining with the buyer or defending themselves from harm. Additionally, sex workers are still required to submit to obligatory testing for STDs, including HIV, under Section 15(5A), ITPA, despite the clear guidance for voluntary testing under the National AIDS Control Programme (NACP).

Access to health care is often difficult for sex workers due to stigma and prejudice. They encounter prejudice from service providers and are often compelled to seek treatment from quacks. Other sex workers' health problems exist, but they are seldom addressed. For instance, since they engage in sexual activity more often than other women, sex workers are more likely to get cervical cancer. However, it is challenging for sex workers to spread knowledge about this, with the exception of certain areas where they are well collected, such as in West Bengal under the Durbar Mahila Saman Waya Committee (DMSC). The Rights of Persons with Disabilities Act, 2016, was passed in spite of the fact that it does not recognise the reproductive rights of people with disabilities. The discrepancies in sexual health are still present. People with disabilities are often seen as asexual or hypersexual by society and medical professionals. In addition to severely limiting their sexual behaviours and expression, this also leaves them open to sexual assault. Serious suppression occurs when people with psycho-social impairments are often not able to express their sexuality in any way.

For instance, if females with psycho-social problems dress well and use makeup, their families and care providers chastise them. Given the societal idea that they are unsuitable for marriage and must thus not dress up or appear beautiful, sexuality is erased, or driven into asexuality. They are denied their right to sexual and reproductive health using this defense. A hysterectomy is often required for women with psycho-social problems due to worries about their susceptibility to sexual assault. According to some reports, families in rural regions sometimes adopt a daughter-in-law with a handicap just for the purpose of reproduction, abandoning her once the baby is born. Although there is evidence that it holds true for other impairments as well, the complaints that practitioners have received specifically mention hearing impairment. There are contrasting attitudes and behaviours towards men with disabilities. To impose asexuality, some people believe that celibacy is the best way to maintain normality and order and that active sexual behaviour is abnormal. Contrarily, there is a false belief that sex may heal impairments, leading families to arrange for their sons who have psychosocial problems to be married off to girls from low-income households.

## CONCLUSION

This discusses the role that healthcare professionals play in fostering equity and a zero-tolerance policy for discrimination in the provision of services related to sexual health. It looks at the need for education and sensitization to overcome implicit biases and guarantee that everyone receives respectful, inclusive care that is free from prejudice and condemnation. The possible effects on



public health outcomes of fostering equality and non-discrimination in sexual health services. It emphasizes how removing obstacles and promoting access to thorough sexual health treatment may result in better sexual health outcomes, lower rates of STI transmission, and more general well-being. This emphasizes the importance of non-discrimination and equality in access to sexual health care as core human rights need in its conclusion. Societies may strive towards ensuring that everyone has the opportunity to exercise their right to obtain thorough and respectful sexual health treatment by eliminating structural obstacles and fostering inclusion in sexual health care. The chapter is intended to serve as a call to action for policymakers, healthcare professionals, and activists to support non-discriminatory and equitable sexual health services as a crucial component of advancing everyone's personal well-being and public health.

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## CHAPTER 21

### **Empowering Informed Choices: Information, Knowledge and HIV/AIDS/STI Prevention**

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#### **ABSTRACT:**

The crucial role that knowledge and information play in empowering people to make wise decisions about HIV/AIDS and sexually transmitted infections (STI) prevention is explored in this chapter. It emphasises how important precise and thorough information is in enabling people to comprehend hazards, take preventative action, and access quality healthcare services. This research seeks to highlight the importance of empowering individuals with knowledge as a critical tactic in the fight against the spread of STIs and HIV/AIDS by examining the effects of information distribution on public health outcomes. The chapter opens by recognising the worldwide impact of STIs and HIV/AIDS and highlighting the significance of proactive preventative measures to lower infection rates. It emphasises how stigma and false information serve as major roadblocks to getting access to healthcare and preventative measures. To dispel myths and promote responsible decision-making, the chapter emphasises the need of disseminating evidence-based information. This chapter also explores the critical elements of information empowerment for HIV/AIDS and STI prevention. It looks at how correct and current information may be distributed to various groups via public health campaigns, educational initiatives, and easily available healthcare services. The chapter focuses on the importance of culturally aware and inclusive methods that meet the unique demands and difficulties experienced by different communities. In addition, this chapter looks at how technology and online resources might be used to spread knowledge about STI and HIV prevention. In order to reach a wider audience and encourage participation in preventative measures, it examines the possibilities of internet resources, mobile apps, and social media.

#### **KEYWORDS:**

AIDS, HIV, Health, Sex, Sexual.

#### **INTRODUCTION**

Making educated sexual decisions, practicing safe sex, and preventing disease are all essential components of maintaining sexual health. They require objective, scientific knowledge on sexual health. The significance of sexuality education and information has grown as a way to combat widespread taboos and misconceptions about sexuality, the persistence of systemic sexual violence against women, the high prevalence of STDs, and sociocultural beliefs and practices that stigmatize and discriminate against people based on their gender and sexual orientation. Due to these factors, sexuality education has been seen as essential to the realization of human rights in the areas of health, education, women's rights, sexual minorities' rights, children's rights, and individuals with disabilities. It is generally accepted that age-appropriate Comprehensive Sexuality Education (CSE) is the best approach to teach kids and teens in schools about their

bodies, personal hygiene, gender identities, and safe sex practises. Notably, this promotes the ability to identify sexual abuse and injury, allowing both children and adults to seek assistance in order to seek protection and reparation. The cornerstone for making informed decisions, exercising affirmative consent, having safe sex, and combating stigma, prejudice, and discrimination on the basis of gender, gender identity, and sexual orientation in adults is scientific, accurate, and nonjudgmental sexuality knowledge. Therefore, sexuality education is not about biological reproduction as is commonly understood by terms like sex education, but rather about gender relations, roles, identities, the body and one's relationship to it, positive and negative sexual contact, harm and pleasure, and disease prevention, among other things[1], [2].

In order to stress the significance of Comprehensive Sexuality Education (CSE), especially in a patriarchal setting, the Special Rapporteur on the right to education has devoted a full report<sup>74</sup> to it. She also notes that it should not be restricted to reproduction and illness prevention. The study emphasises the importance of sexuality education in fostering tolerance for sexual expressions that are different from one another and in promoting safety and accountability in interpersonal interactions. The Committee on the Elimination of Discrimination Against Women (CEDAW), the Committee on Economic, Social and Cultural Rights (CESCR), and the Committee on the Rights of the Child have all emphasised the importance of CSE for reducing the risk of STIs, unintended pregnancies, and violence against women as well as for enhancing sexual relationships.

Status of compliance Nowhere in India has yet implemented Comprehensive Sexuality Education (CSE) in accordance with international norms. Adolescent sexuality education has often encountered strong opposition in the nation, as seen by the criticism of sex education as immoral and inappropriate by certain groups. However, gender and sexuality-related topics are addressed in the Adolescence Education Programme (AEP), which is carried out by the National Council of Educational Research and Training (NCERT) in collaboration with UNFPA. The NCERT and UNFPA revised the AEP curriculum in 2010, after some early criticism of its content, and it is now used in the 1120 Kendriya Vidyalayas and Jawahar Navodaya Vidyalayas.<sup>76</sup> This initiative includes curriculum for teenagers starting in ninth grade that addresses gender stereotypes, drug misuse, changes in the body, recognising and reporting abuse, and HIV/AIDS.<sup>77</sup>

However, the presentation only briefly touches on issues like same-sex relationships and gender diversity in respect to sexuality. The fact that it does not include pupils in grades lower than nine further restricts it. By the time a kid reaches puberty, they may already have experienced abuse since abusers often choose younger females who haven't started menstruation as their victims.<sup>78</sup> The necessity to execute the AEP project in upper elementary grades was also suggested in a UNFPA review of the initiative. The NCERT, which has created curriculum and resource materials for this age range, has taken this into consideration.

The lack of proper teacher preparation and the instructors' reluctance to discuss sexual health problems, particularly those pertaining to contraception and safe sex, represent another significant weakness in this area.<sup>80</sup> They also often advocate abstinence rather than education as a strategy of safeguarding teenagers, emphasising solely menstrual hygiene and biological development. Due to cultural bias and societal misunderstandings, instructors are resisting change because they fear losing the respect of their pupils. Teachers' job overload is another because of their hesitation, which makes them resist taking on more responsibility. In the setting

of poverty, poor literacy, and high dropout rates, methods outside of formal education that teach and inform on sexuality and sexual health issues are of utmost significance. Due to the large number of children who lack access to formal education and the high risk of abuse and damage faced by vulnerable adult demographic groups, information must be made accessible via drop-in centres, peer educators, and community health professionals[3], [4].

Teenagers are more likely to engage in risky sexual behaviours and are at higher risk of getting sexually transmitted infections (STIs) if they are not given enough knowledge on sexual health and wellbeing from an early age. According to government estimates, the age range of 15 to 29 years accounts for 44% of all recorded AIDS cases in India. According to recent research by Lady Hardinge Medical College, the prevalence of STIs among teenagers increased from 1% to 4.9%.<sup>82</sup> This was ascribed to both sexual assault and a lack of thorough sex education. In addition, females are twice as likely as boys to experience maltreatment, according to UNICEF.<sup>83</sup> Women know less about HIV/AIDS, STIs, modes of transmission, and prevention than men do, according to research on gender and HIV. The Rashtriya Kishor Swasthya Karyakram (RKSK) was established by the health ministry to address the health requirements of adolescents, who are increasingly seen as a crucial population for the growth of the nation. The RKSK includes a provision for the establishment of Adolescent Friendly Health Clinics (AFHCs), which provide counselling on various issues affecting adolescents, such as sexual and reproductive health (SRH), as well as referrals for other resources.

According to reports, the implementation of AFHCs is uneven and dependent on the functionaries' orientation and training. Additionally, practitioners note that due to a shortage of skilled counsellors who can properly teach patients about sexual health concerns, AFHC clinics are often inoperable. Boys are often left out of the project since teenage girls are frequently the only ones who are sent to these clinics for problems with menstrual hygiene or other reproductive health concerns. Instead of examining sexual and reproductive health more widely, the project has confined its emphasis to just reproductive health. Due to various sections in the POCSO, the legislation on child sexual crimes, the scope and professional ethics of educational, counselling, and associated support services have been compromised.

Teenagers are now subject to retaliation and punishment for any level of consensual sexual contact, from touching to penetrative intercourse, as a result of POCSO's rise in the legal consent age from 16 to 18 years. Accessing stigma-free sexual health treatments and contacting service providers has become more difficult due to the legislative necessity for obligatory reporting of any sexual contact with people under the age of 18, since these are now considered crimes. Importantly, it changes a basic tenet of counsellors' and healthcare professionals' professional ethics by forbidding them from maintaining confidentiality. Additionally, this goes against the 1992 ratification by India of the United Nations Convention on the Rights of the Child (UNCRC). The United Nations Convention on the Rights of the Child stipulates in Article 12 that States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child[5], [6].

## DISCUSSION

As of 2016<sup>88</sup>, 2.1 million persons in India were HIV-positive, making it the third-largest HIV pandemic in the world. Sexual contact is the primary cause of 87.4% of infections, which are mostly found in groups of people who are already at high risk of contracting HIV. Following the

discovery of the first HIV case in 1986, the Indian government established the National AIDS Committee inside the Ministry of Health and Family Welfare. The nation established the National AIDS Control Organisation (NACO) to carry out its first National AIDS Control Programme (NACP) in 1991. NACO has been collaborating with multilateral, bilateral, and civil society groups to lower the HIV prevalence and provide people living with HIV access to comprehensive medical care as well as socio-legal protection.

Regarding both, establishing the circumstances that make individuals susceptible to catching HIV/AIDS, and once infected, the form of discriminations and violations that follow, human rights concepts are directly related to the HIV/AIDS pandemic. Globally, the fight against HIV/AIDS has highlighted how denying sexual health-related human rights makes certain population groups more susceptible to infection, while also condemning those who are already infected to a lifetime of abuses and discrimination in all spheres of life. This is particularly true for the most monetarily vulnerable groups, whose sexuality is stigmatised by the state, such as sex workers, men who have sex with men, trans people, women, and children. These groups are more likely to develop the illness because they are both discriminated against and criminalized.

The right to health is discussed in Article 12 of the International Covenant on Economic, Social, and Cultural Rights (ICESCR). It highlights the need of creating education and preventative programmes as well as awareness campaigns for tackling STIs, notably HIV/AIDS and other SRH challenges, in General Comments 14, (2000) on the highest attainable right to health. In order to provide SRH services, including HIV/AIDS prevention and treatment, skilled medical workers are required, according to CESCR General Comment 22 (2016) on sexual and reproductive health. It also expresses grave concern about the ways that laws restrict access to SRH by criminalizing SRH services and information, HIV non-disclosure, exposure, and transmission, as well as consensual sexual activity between adults and transgender identity and expression.

According to the Special Rapporteur on the Right to Health (2010), criminalising same-sex acts, sex labour, and HIV transmission has a detrimental effect on the right to health's fulfilment. The criminalization of same-sex behaviour promotes the stigma of being abnormal and deviant, seriously diminishing one's sense of self. Similar to this, criminalising sex work or actions related to it has a negative impact on the sexual and mental health of sex workers, as well as their access to resources and legal recourse, while also amplifying abuse and violence in their life. They are discouraged from obtaining medical care, including blood testing for STIs like HIV, and it justifies violence from both state-sponsored and non-state actors.

### **Compliance Standing**

The aim of India's fourth National AIDS Control Programme (NACP), which is now being implemented, focuses on targeted interventions with high-risk groups to lower the incidence of infection. However, there are issues with the program's finance. India pledged in 2012 to pay 90% of HIV/AIDS activities independently while reducing its dependency on foreign aid. However, the government's pledge to the NACP budget is not met, as shown by a 22% decrease in spending between 2014–15 and 2015–16. Additionally supporting this is the fact that the nation's HIV prevalence rate decreased from 0.41% in 2001 to 0.26% in 2015.

The study's respondents have indicated grave worries over budget cuts as well as the delay in the delivery of cash that results in payments to government-supported activities. They predict that



this will raise the rate of HIV infection and may already have done so. Peer-led work in the vulnerable areas has drastically decreased or stopped altogether as a result of the financial cuts. Community workers have found it challenging to subsist due to the delay in the distribution of funding, forcing them to turn to sex work once more. Lack of service supply and economic security drives people to take risks[7], [8].

The epidemiological approach used by HIV prevention programmes has been criticised by experts in the field because it has serious negative effects on both the health of HIV-positive people and the sexual health of women and adolescents, who are not typically considered to be at high risk. Family planning and STI prevention efforts have been separated from HIV-related activities as a consequence of such tailored intervention programmes. The target-driven strategy of HIV programming, whose major priority remains HIV infections of vulnerable populations alone, even at the expense of their general well-being and human rights, is what has led to the fragmentation that is detailed below. For instance, HIV initiatives prioritise the use of ART for PLHIV without considering the individual's overall nutrition, who may come from a lower-income household.<sup>96</sup> The emphasis on vaginal sex alone in family planning, where condoms are primarily marketed for preventing pregnancies without much mention of their role in preventing STD/HIV infections, seems to indicate a disconnect between public health programmes on family planning and those on HIV/AIDS. Additionally, women bear the majority of the cost of family planning via sterilisation schemes and contraceptive tablets.

Sterilisation camps are the most practical choice for women from lower socioeconomic backgrounds since they lack access to and knowledge about contraception.<sup>97</sup> Although these techniques are effective in preventing pregnancy, they are ineffective at preventing STIs or HIV. According to data from the National Family Health Survey (NFHS) 2015–16, female sterilisation continues to be the most popular form of family planning (35.7%), while male sterilisation is the least prevalent (0.3%). Additionally, focused interventions concentrating on High Risk Groups (HRGs) sometimes come at the expense of public education and awareness campaigns about HIV/AIDS and how to avoid it. Adolescent females, who often don't know about HIV and other STIs, face the chance of contracting the illness from their partners and passing it on to their offspring as a result of this.<sup>99</sup> According to UNICEF figures from 2003 to 2008, just 36% of teenage boys in India have a thorough understanding of HIV, while only 20% of their female counterparts do the same.

Only 28.1% of Indian women, according to the NFHS-4 statistics, are fully informed about HIV/AIDS. General education is mentioned in the National Policy on Prevention of Parent-To-Child Transmission (PPTCT) as a way to shield women in reproductive age from infection. However, this crucial aspect of education has been overlooked in favour of just testing pregnant mothers. In addition, despite India's commitment to ending parent-to-child transmission, just 38% of pregnant HIV-positive women got PMTCT (preventing mother-to-child transmission) therapy, according to a UNAIDS report.

The utility of prophylactics for disease prevention in women (such as female condoms) or for anal sex among heterosexuals is similarly not well understood. Although studies suggest that heterosexual couples are increasingly engaging in anal intercourse for sex during menstruation, to avoid pregnancy, and to maintain the appearance of girls' virginity, there has not been much work put into developing inclusive and integrated solutions to HIV, STDs, and family planning. Even though a majority of women (67%) and men (81%) are aware that using condoms regularly



might lower their risk of contracting HIV and AIDS, just 9% of them actually use them as a method of family planning, according to the National Family Health Survey (NFHS) 2015–16. Additionally, women in Indian culture have relatively limited bargaining power in close relationships, which makes this accurate. Additionally, there is a dearth of integrated resources for sexual health and general health concerns, which increases illness susceptibility in people. For instance, despite the knowing that HIV might increase a person's vulnerability to getting TB and other STIs, people living with HIV (PLHIV) are often not informed about TB and other STIs. It was also discovered through practitioner interviews that patients often find it challenging to receive integrated services in one location and are compelled to travel to numerous locations to access diverse treatments.

The fact that the Delhi High Court's decision to decriminalise same-sex acts was overturned by the Supreme Court in 2013 is another significant worry about HIV prevention. The Supreme Court has acknowledged a curative petition that would reopen the issue, but the Constitutional bench that will hear the case has not yet been assembled. The same goes for the failure to decriminalise sex work, leaving those who engage in it susceptible to STIs and HIV/AIDS[9], [10]. However, the nation has made some significant progress for HIV-affected people and transgender people. In the *NALSA v. Union of India* decision, the Supreme Court upheld the freedom to gender self-determination and recognised a category of third gender. Despite grave concerns about its flaws and contradictions with the *NALSA* ruling, the Rights of Transgender Persons Bill 2016 was later introduced in the lower house of parliament. The parliamentary standing committee was consequently given jurisdiction over this measure, and it has now produced its report. The committee has requested that the government take action to guarantee that trans individuals have access to health care, education, employment, and political involvement.

In light of the fact that trans persons are more likely to have sexual health issues, this includes dedicated HIV sero-surveillance clinics for them. To protect the rights of Persons Living with HIV (PLHIV), the HIV and AIDS (Protection and Prevention) Bill was recently approved. The bill includes provisions that make ART a legal requirement, criminalise all kinds of prejudice towards people living with HIV, and outlaw the practise of testing people for HIV without their permission. A person who is aware of their HIV status is responsible for preventing HIV transmission, and the Act permits them to use risk-reduction measures to do so, such as disclosing their status before engaging in sexual activity with another person. Although it is a step in the right direction to defend PLHIV rights, civil society organizations have protested to the usage of the term as far as possible in the section on service provision. They contend that this statement gives state governments a free pass to shirk their obligations.

## CONCLUSION

This discusses how empowering information may have a positive effect on lowering transmission rates and enhancing health outcomes. It looks at how making educated decisions about safe sexual practises, routine testing, and early diagnosis may help with HIV/AIDS and STI treatment and prevention. The chapter emphasises how information empowerment has the ability to lessen the stigma associated with these illnesses, encouraging a more accepting and encouraging atmosphere for those who are afflicted. The end of this chapter emphasises the important significance of empowerment via information and knowledge as vital instruments in HIV/AIDS and STI prevention. Societies may help people make better decisions, obtain quality

healthcare services, and help lower transmission rates by providing them with accurate and thorough information. The chapter is a call to action for governments, healthcare professionals, and organisations to prioritise knowledge empowerment in their preventive efforts as they strive towards a future with lower rates of HIV/AIDS and STI prevalence and better general public health.

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## CHAPTER 22

### Governing Sexual Autonomy and Protecting Persons: Sexual Violence

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#### ABSTRACT:

The complicated interactions between controlling sexual autonomy and safeguarding people from sexual assault are critically examined in this chapter, taking into account the challenges of developing efficient legislative frameworks. It explores the difficulties encountered by legislators and policymakers in finding a balance between protecting people's rights to make independent choices about their sexuality and making sure there are effective policies in place to stop and treat sexual assault. This research intends to highlight the need for comprehensive and rights-based policies that promote empowerment, consent, and safety for everyone by examining the consequences of policy approaches. The chapter opens by recognising the relevance of sexual autonomy as a basic human right and highlighting the importance of personal freedom in making decisions regarding romantic relationships, sexuality, and reproductive health. It looks at the necessity for laws that support various sexual expressions, dispel stereotypes, and eliminate prejudiced standards that limit sexual freedom. This chapter also explores the challenges of stopping and dealing with sexual assault. It investigates the frequency and effects of sexual assault on people, families, and communities, emphasising the need for quick implementation of strong protective and supportive measures. The research highlights the significance of survivor-centered strategies that give dignity, consent, and trauma-informed treatment first priority. Additionally, this chapter looks at how extensive sex education and awareness campaigns might promote sexual autonomy and deter sexual assault. Sex education may be a critical tool in enabling people to take control of their bodies and relationships by arming them with information about boundaries, healthy relationships, and consent.

#### KEYWORDS:

Autonomy, Gender, Legal, Sexual, Violence.

#### INTRODUCTION

By positioning males as either guardians or predators of women, sexual violence serves to uphold a gender-hierarchical social order that fosters fear and inequality. The need for laws against sexual assault is acknowledged in order to meet the constitutional principles of equality and life by addressing sexual and gender disparities in society. These rules are thus supposed to reject patriarchal preconceptions that determine a woman's eligibility for legal protection based on her appearance, behaviour, and chastity. International human rights legislation has defined sexual assault against women as a severe form of gender-based discrimination with serious ramifications for physical, emotional, mental, and social wellbeing. Although sexual violence is primarily used against women as a means of punishment and control, international law recognises that it also affects children, people with disabilities, transgender people, and men,

particularly those who identify as or are perceived as homose. This is because sexual violence results from a variety of inequalities that reinforce power hierarchies, including gender, gender identity and sexual orientation, age, marital status, class, caste, profession, and others. Similar to how certain demographic groups may be more susceptible to sexual assault due to the circumstances surrounding the violence, such as armed warfare, confinement, etc. As a result, international law mandates that all people be given legal protection against rape and sexual assault in all of its forms and manifestations[1], [2].

It requires that rape be defined broadly to include all non-consensual penetrative sex acts, including oral sex with a penis or vagina as well as anal, vaginal, and penetration with an instrument or finger. No of their age, marital status, sexual orientation, or gender identity, everyone has the right to legal protection and restitution. In order to evaluate the legitimacy and legality of sexual intercourse, international law relies on freely provided permission. In accordance with international law, states are responsible for the prevention, prosecution, investigation, redress, and reparations of sexual violence. To ensure reparative justice, states must also address the causes, manifestations, and victim care of sexual violence while recognising the legal right to engage in consensual sexual relations. However, criminalizing such contact prevents societies from reaching their highest potential. States must also provide adequate remedy, compensation, and a method for pursuing it. Given that sexual assault is thought to be gender-based, the prosecution process must likewise be gender sensitive and provide strong legal protection, including penalties for offenders and compensation for victims/survivors.

This section examines the degree to which the law upholds the right to consent to sexual encounters while also providing protection against all types of sexual assault, particularly against those groups who are more susceptible to it. It also draws attention to the challenges facing prosecutors due to the victim's or offender's position or line of work. The landscape of protection against sexual abuse has changed during the last five years as a result of many legal developments. Sexual assault on women and children is prohibited under the Protection of Children from Sexual Offences Act, 2012 (POCSO) and the Indian Penal Code, 1860 (IPC), respectively. The Supreme Court's rulings on the criminalization of homosexuality, the recognition of transgender rights, and decisions to modify processes to be more considerate of rape victims also influence the law in this area.

The law still does not consistently differentiate between consenting and non-consensual sex despite major change. Some types of consenting sexual contact are also made illegal, although not all forms of non-consensual sexual contact are. In this section, the degree of legal protection and any gaps therein are reviewed. The first half of the discussion focuses on disadvantaged groups, while the second part discusses areas of legal protection that are underappreciated and need more attention.

## **Groups at risk**

### **Women**

The Criminal Law Amendment of 2013 changed the definition of rape to include all forms of penetrative sexual activities, as well as additional crimes including stalking, sexual harassment, disrobing, and voyeurism. In order to combat a history of judicial stereotypes that used women's prior sexual history and behaviour to suggest assent, a legislative definition of consent was

developed. Despite these developments, rather than being founded on consent, the statutory law continues to be anchored on ideas of good sex and bad sex, ingrained in what is socially acceptable or taboo[3], [4].

## DISCUSSION

The IPC's Section 375 defines rape as an offence committed solely by a man against a woman, and although it lists a number of aggravating factors, it specifically excludes marital rape between cohabiting partners. Therefore, under this clause, rape committed by a husband against his wife cannot be tried as rape unless the woman is under fifteen or separated from her husband. While it stands to reason that cruelty against a married woman claims involving rape between cohabiting spouses should be covered by section 498A, it is unclear how this protection can be guaranteed in the absence of a precedent and in light of the ongoing opposition to the use of domestic violence laws. Interlocking rules in family and criminal law have established the husband's complete control over the wife's sexuality, which is quite alarming since they come at the expense of sexual autonomy, a crucial component of sexual health. For instance, the law requires a woman to be faithful and abstinent before she may assert her economic rights. As a result, a husband may seek to end their marital relationship through judicial intervention, punish their wife's lover for consenting to sex with her, or refuse to pay their wife maintenance or alimony (on the grounds that she is unchaste).

### Children and teenagers

Due to the fact that sexuality begins to develop throughout puberty,<sup>126</sup> both the State and non-State actors such as families and communities have a responsibility to help children acquire age-appropriate skills related to sexuality and sexual health. However, the Protection of Children from Sexual Offences Act, 2012 (POCSO), a crucial milestone in the fight against child sexual abuse, treats all people under the age of 18 as a single, undifferentiated group and makes no distinction between children between the ages of one and eighteen. This goes against international human rights norms, which link a child's best interests to factors like their developing capabilities. The law makes a broad range of sexual behaviours illegal, including penetrative sexual contact as well as touching, kissing, and caringses. Consensual sexual contact with a minor, when read in conjunction with the IPC's corresponding provisions, may be treated as aggravated rape in certain situations, subjecting the accused to absolute liability at the expense of a fair trial even though they may be of proximate age and in a consensual relationship with the adolescent girl. The age of statutory rape has been lowered in comparable countries, and age proximity provisions that protect minors engaging in consensual sexual intercourse from the severity of the law have been used to solve this anomaly.

Contrarily, minors between the ages of 16 and 18 are considered to be guilty like adults under the 2015 Juvenile Justice Act, despite the fact that the competence of adolescents to participate in sexual interactions is not acknowledged. As a result, even while the law does not consider adolescents' ability to agree to sexual activity, it does recognise teenage males' competence to face punishment rather than restitution for committing rape. POCSO verdicts reveal that parents most often use it to punish their daughters' boyfriends. Young couples elope to wed in order to gain social legitimacy and avoid parental repercussions, but they are nonetheless punished, which contributes to early marriage. This is because the criminalization of consenting teenage sexual encounters is misguided and leads to prosecution. Another element of the POCSO that has seriously hampered teenage access to healthcare and other services is the requirement that all

instances of sexual contact with a minor be reported. Failure to alert the authorities to the incidence of or suspicion of sexual abuse is criminally punishable under 133POCSO. The law imposes an obligation to disclose this as well since consensual sexual contact with juveniles is included in the scope of criminalization.<sup>134</sup> As a consequence, service providers including medical professionals as well as regular people are often unable to assist because they are either reluctant to disclose such an occurrence without the adolescent's agreement or because it entailed consenting sexual contact. The necessity for obligatory reporting undermines the interests of the child by directly preventing access to support services like healthcare. Additionally, it is incompatible with other governmental programmes like the ARSH clinics that aim to provide adolescents with healthcare services, including abortion services. Similar to how other laws governing healthcare services place a premium on patient privacy, the obligatory reporting obligation runs counter to that principle<sup>[5], [6]</sup>.

### **Lesbians, Gays, Bisexuals, and Transgender individuals**

There are many reports of sexual assaults against MSM and transgender people who are being held by the police.<sup>138</sup> There have also been cases of lesbian and bisexual women being sexually abused by members of their own families, either directly or indirectly, in an effort to cure them of their non-normative sexual orientation and normalize them. Although such women officially have access to the Protection of Women from Domestic Violence Act, 2005 (PWDVA), this hasn't often been the case. Additionally, same-sex partnerships may experience domestic and sexual abuse that is not accepted as such. People who identify as non-normative in terms of their sexual orientation and gender either may not have their experiences as sexual assault victims accepted by the law or find it difficult to disclose and prosecute crimes perpetrated against them out of fear of retaliation. This essentially limits restitution and compensation to sexual assault victims who are neither women or kids.

While this is going on, Sec. 377 of the IPC criminalises any non-peno-vaginal sexual intercourse as being against the order of nature, regardless of permission. In the past, this clause has been used to punish those who identify as having non-traditional sexual and gender identities. The gay, lesbian, and bisexual members of the transgender community are desexualized as a result of the criminalization of their sexual orientations, despite the fact that the right to self-determination of gender has been acknowledged. When Dr. Ramchandra Siras, a professor at Aligarh Muslim University, was fired in 2010 due to his sexual orientation, it revealed institutional discrimination and the possibility of legal remedy if homosexuality were decriminalised. While Dr. Siras was with a male companion, individuals from the institution made a forceful entrance into his living space together with a few media. Instead of opening an investigation into the break-in and attack, he was made to strip off under duress, photographed, physically humiliated and publicly shamed. This created the pretext for his suspension from the University post and his eviction from his flat, respectively.

The Delhi High Court had decriminalised homosexuality at the time this incident took place, thus the Allahabad High Court ordered a stay on Dr. Siras's suspension and an order to have him returned to his official house. Soon after the court's decision in Dr. Siras' favour, his body was discovered. Another instance of homosexual males being publicly shamed occurred in 2011, when the Telugu news station TV9 broadcast a three-day programme on Gay culture rampant in Hyderabad. The station released the social media accounts, images, and contact information of numerous gays who had accounts on the gay dating site planetromeo.com as part of this exposé.



The News Broadcasting Standards Authority penalised the station and ordered it to publicly apologise for breaking journalistic ethics as a result of complaints[7], [8].

Favorable rulings by authorities in the two instances mentioned above were only made possible by the Delhi High Court's reading down of Section 377, which exempts consenting sexual activity from the scope of criminalization. Youth who came-out after the Delhi High Court judgement, however, suffered a setback in self-esteem and confidence due to the Supreme Court's 2013 re-criminalization of the issue, which put them at serious danger of harassment and punishment.<sup>150</sup> The Supreme Court has acknowledged that Section 377 makes it difficult to exercise one's right to privacy. The criminalization of consensual sexual relations is contrary to the rights to privacy, equality, dignity, and freedom of expression, in addition to discouraging MSM from reporting sexual violence for fear of being stigmatised, arrested, and prosecuted, leading to health issues including untreated STIs.

### **Those with disabilities**

Practitioners have seen a significant number of incidences of sexual harassment and assault by hospital employees against all people with disabilities, regardless of gender. This includes, but is not limited to, unwanted touching during checkups and sexual assault by hospital employees and convicts.<sup>152</sup> In mental health facilities, sodomy is often reported by another prisoner or by the Group D personnel. However, compared to physicians, who are known to engage in sexual harassment, Group D employees often get suspensions. There are cases of psychiatric professionals examining female patients' breast palpitations without a reason. In one instance, a patient's antipsychotic medications were completely stopped when she begged the doctor to stop massaging her breasts.

### **Activist for disability rights**

Some people, such as those with invisible impairments like hearing loss or vision impairment, or those who may not be able to articulate or recall a sexual assault experience, may be more susceptible to sexual violence than others. Depending on the kind of handicap, there are various difficulties.

### **Sexual workers**

Even though the legislation is the same for all women, sex workers face additional challenges. On the surface, it would seem that sex workers had little access to legal protection, despite the fact that the law amendments of 2003 and 2013 forbade the use of prior sexual history or examination of it in connection with rape cases. For sex workers, the stigmatised nature of the industry creates a barrier that prevents them from seeking justice for sexual abuse that occurs during or outside of their profession. In fact, they claim that even when they try to file a standard complaint, the police turn them away. The Immoral Trafficking Prohibition Act (ITPA), 1956 makes it illegal to solicit for sex work and to live off the income of a sex worker. Sex work itself is not illegal in India. This immediately implicates their family members and leaves them open to police persecution. It furthers the stigmatization of sex labour. Despite the Supreme Court's directives in the Budhadev Karmaskar case to guarantee that 'rehabilitation' of sex workers is not forced but voluntary<sup>159</sup>, the legal framework has mostly been used to obstruct their rights and well-being and has only sometimes been utilised to protect them[9], [10].

## **Reparative Justice and Victim Assistance**

Victim compensation, which covers expenses paid by the victim for medical care, legal remedies, and other disturbances brought on by the attack, is now the sole state-provided assistance accessible to victims of sexual assault. As a result, the law on victim care does not fully account for the negative effects that a survivor of sexual assault may experience, such as abandonment by a partner or family member, forced marriage, loss of livelihood, inability to access medical care and services, hostility from state authorities, including the police, when reporting the crime, etc. The victim does not have access to effective prosecutors or support in reporting the crime. According to municipal legislation, the state is not required to provide the assault victim housing, medical care, or counselling for their injuries.

The state's payment of reparations or compensation acknowledges the harm done to the victim and helps the survivor get well and heal. Under S. 357A, Code of Criminal Procedure, 1973 (CrPC), there are state-specific compensation programmes for rape victims that are not standard and under which interim compensation, while required, is seldom provided. The majority of victims are unaware of their right to file a claim for compensation, according to a research on the pre-trial and trial phases of rape cases in Delhi. This is because no one is responsible for informing and facilitating the victim's access to these rights or processes. As a result, the programme formerly known as One Stop Crisis Centres, which was designed for victims of violence, has been renamed One Stop Centres. In terms of therapy, relocation assistance, economic support, and a promise that violence won't be repeated, there is a significant gap in victim care.

### **'Disturbed neighborhoods' provide challenges for prosecutors**

Victims of sexual violence perpetrated by state actors in war zones have also experienced difficulties in reporting and prosecuting such crimes.<sup>164</sup> To yet, requests to bring allegations of sexual assault by armed personnel in disturbed areas<sup>165</sup> have not been granted. Although a sanction is not necessary for the prosecution of a public servant<sup>166</sup>, it is debatable and open to interpretation whether armed forces, particularly those deployed in tumultuous areas under the Armed Forces Special Powers Act, 1958 (AFSPA), fall within the definition of public servant and does not, therefore, ensure the prosecution of every accused person upon a complaint.

### **Sexual morality regulation**

In India, punitive sexual control and policing are pervasive. The abuse of laws on obscenity, indecency, and public annoyance to police couples is a result of people's discomfort with the display of closeness in public. State and non-state entities closely monitor actual and perceived sexual manifestations, such as choices in relationships, clothes, and computer access. For instance, in 2009, the police detained two young people they claimed to have seen kissing at a metro station and filed an obscenity and annoyance complaint against them. About forty couples were detained by the Mumbai police in August 2015 after they stormed hotels on Madh Island and Aska for engaging in indecent behaviour in public. The cops didn't admit they had been excessive until the event got attention in the media. Despite overwhelming evidence that Anti-Romeo Squads mostly target young, consenting persons and have no impact on sexual harassment, the state of Uttar Pradesh has institutionalized this kind of policing.

Additionally, non-state actors like as political parties, khap panchayats, and even families regulate sexual conduct by using criminal tactics with impunity to punish individuals who are seen to be acting outside of socially accepted norms. Young couples are often murdered in the name of honour as a consequence of family resistance to intercaste and interreligious marriages.<sup>172</sup> Violence-filled vigilante groups may also target same-sex and heterosexual couples in public settings, especially on Valentine's Day. In the name of love jihad, Hindu women in relationships with Muslim men have also been pressured to file reports of forced religious conversion and sexual exploitation in order to deprive them of their agency and criminalize Muslim males.

### **Traditional Practices That Are Negative**

The practise of female genital mutilation of Bohra females also demonstrates a discomfort with sexuality and sexual pleasure.<sup>175</sup> While there is a dearth of research on FGM in India, community polls indicate that over 80% of Bohra women were subjected to FGM when they were young. The majority of the time, FGM has negative psychological impacts in addition to the physical mutilation that prevents women from having any sexual pleasure.

### **CONCLUSION**

The difficulties of striking a balance between sexual autonomy and the prevention of sexual assault are also discussed in the chapter. It looks at how institutional hurdles, victim-blaming attitudes, and cultural norms might prevent sexual abuse from being reported and people from accessing support services.

The research emphasises the need for legislative frameworks that dispel false assumptions, advance consent education, and provide a secure setting for reporting crimes and pursuing redress. The difficulty of regulating sexual autonomy and safeguarding people from sexual assault. It highlights the need for comprehensive and rights-based policy frameworks that give the most weight to everyone's empowerment, consent, and safety. Societies may seek to create circumstances that maintain sexual autonomy while building a culture of respect, consent, and support by incorporating survivor-centered methods, thorough sex education, and awareness campaigns. The chapter serves as a call to action for decision-makers, educators, and communities to work together to create efficient policy frameworks that support everyone's dignity, autonomy, and well-being without raising concerns about sexual assault.

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## CHAPTER 23

### **Human Rights and Reproductive Health: Understanding Scope and Impact**

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#### **ABSTRACT:**

In order to understand the nature and breadth of human rights pertaining to reproductive health and well-being, it is important to understand the complex interactions that exist between personal freedom, gender equality, and access to high-quality reproductive healthcare. It examines the many facets of reproductive rights, such as family planning, maternal health, safe abortion, and the abolition of harmful practises. This research seeks to highlight the necessity of promoting reproductive health as a basic human right in order to promote the wellbeing and dignity of all people by analysing the worldwide framework of reproductive rights. Beginning with a definition of reproductive rights within the framework of human rights and a focus on their foundation in the ideas of autonomy, privacy, and equality, the chapter goes on to explain these rights. It looks at how reproductive rights are seen as essential to both gender equality and the general well-being of all people. The different facets of reproductive health and well-being are also covered in this chapter. It looks at how important family planning is, how accessible contraceptives are, and how important it is to have the freedom to choose how to have children. Maternal health is another topic covered in the survey, with a focus on how important it is to guarantee safe and honourable pregnancies and deliveries. The difficult subject of safe abortion as a reproductive option is also covered in the chapter. In addition to addressing the need to eliminate stigma and prejudice related to abortion, it looks at how crucial it is to provide access to safe and legal abortion services.

#### **KEYWORDS:**

Gender, Human Rights, Health, Sexual, Well-Being.

#### **INTRODUCTION**

Reproductive rights are guaranteed by the Indian Constitution and are embodied in the United Nations (UN) human rights treaties and the consensus conference agreements to which India is a party. These treaties and other legal agreements make clear that the state must respect, preserve, advance, and implement rights connected to reproductive health, without discrimination, paying special attention to weaker and disadvantaged demographic groups. This chapter examines how the Indian Constitution and international frameworks handled reproductive rights and highlights areas of compliance and gaps. Rights to abortion were first established. The International Conference on Human Rights, which was convened in Tehran in 1968 to further the tenets and objectives of the Universal Declaration of Human Rights (UDHR), is when the concept of reproductive rights as human rights was first introduced. India took part in the conference and was a member of the organising committee. The Proclamation of Tehran, the International Conference on Human Rights' Final Act, was the conference's product in 1968. The Final Act's

Section 16 affirms the human rights of couples to make decisions about the number and spacing of their children in a free and responsible manner, as well as to have access to the knowledge and education necessary to do so. Principle 12 of the Mexican Declaration on the Equality of Women and the Promotion of Peace and Development<sup>178</sup> reaffirms that couples and individuals have the freedom and responsibility to choose whether and when to have children, as well as the access to knowledge and education that would allow them to do so.

The Vienna Declaration and Programme of Action, adopted by the World Conference on Human Rights in 1993, highlighted the right of women to access the most comprehensive family planning services and to get sufficient health care on the basis of equality with men. However, the Programme of Action from the Cairo 1994 International Conference on Population and Development (ICPD) provides a thorough definition of reproductive rights<sup>[1], [2]</sup>.

Reproductive rights are described as a condition of whole physical, mental, and social well-being in all aspects relevant to the reproductive system and to its functions and processes, and not only as the absence of sickness or infirmity. In order to be in good reproductive health, a person must be able to have a fulfilling and safe sexual experience, be able to reproduce, and have the choice to choose if, when, and how frequently to do so. The State must improve women's sexual and reproductive health and education, which also reiterates the women's right to manage their fertility. The Beijing Declaration and Platform for Action,<sup>181</sup> which was adopted during the Fourth World Conference on Women in 1995, reiterated this once again. The fundamental right of all couples and people to choose freely and responsibly how many, when, and how far apart to have children, as well as the right to the best possible sexual and reproductive health, are stated in the statement. In accordance with human rights treaties, this also includes their freedom to make reproductive choices without being subjected to discrimination, coercion, or violence.

The United Nations General Assembly approved the Millennium Declaration<sup>182</sup> in the wake of the Millennium Summit in New York in 2000, with the goal of ending poverty and bringing about development for everyone. To help execute the Declaration and attain this goal by the year 2015, eight Millennium Development Goals (MDGs) were created. The MDGs include many objectives that speak to reproductive rights and health. The MDGs were criticised, nevertheless, for dividing development strategies and goals into separate silos. The MDGs fully disregarded a health systems approach and failed to address the escalating problems within health systems, such as the underfunding of public health, the deterioration of the public health system, the commercialization of health care, and the influence of the pharmaceutical sector. Instead, the verticalized approach to complex and systemic issues did not even take into account the factors that determine the health system, far from creating the essential connections with the social determinants of health.

Given that it was believed that these objectives could be met independently, it was concentrated on lowering infant and maternal mortality rates (IMR and MMR), as well as tuberculosis (TB), malaria, and HIV/AIDS.

The more significant systemic problems were not addressed. The diversity of women's backgrounds, experiences, needs, demands, and realities including those of women with disabilities, women from religious minorities, young girls, indigenous women, lesbians, and others who typically belong to the poorest groups and have little to no access to health, education, and other services were not taken into account by the MDGs. Locating rights to reproductive health: Recognising and upholding various human rights. Below, we look at the



numerous human rights that interact with reproductive rights and give them shape and substance. These rights' legal foundation is defined, and its importance to reproductive rights and health is examined.

### **Law of Health**

In its General Comment No. 14, the Committee on Economic, Social, and Cultural Rights (CESCR) discussed the right to health. It describes the right to health as an inclusive one that covers not only timely and appropriate health care but also the fundamental factors that influence health, such as access to clean, safe drinking water, adequate sanitation, a sufficient supply of food, nutrition, and housing, wholesome working conditions, and information on sexual and reproductive health. In its General Comment No. 22, the CESCR expanded on these four key components in relation to sexual and reproductive rights.

**Accessibility:** Health programmes, services, and facilities must be readily accessible, have a sufficient number of competent medical professionals on staff, and provide the complete spectrum of reproductive and sexual health care services. These facilities also include those that are required to address the fundamental factors that affect health, such as access to clean water and sanitary conditions.<sup>186</sup> All people should have access to basic medications, such as contraceptives, abortion and post-abortion care medications, as well as pharmaceuticals including generic medications for STI and HIV/AIDS prevention and treatment<sup>[3], [4]</sup>.

All people must be able to physically access the health services, facilities, products, and programmes. Additionally, the state should adopt positive measures to address the needs and restrictions of vulnerable groups like the disabled and residents of rural and remote areas. The Committee observes that sexual and reproductive health services, whether publicly or privately offered, must be affordable for everyone. To prevent people and families from being unfairly burdened with medical costs, essential products and services, particularly those connected to the factors that affect sexual and reproductive health, must be offered free of charge or [should be] based on the concept of equality.

## **DISCUSSION**

States must eliminate any barriers that stop medical professionals from helping individuals impacted by war and must safeguard and prevent damage to medical facilities, supplies, personnel, and equipment. Reproductive health facilities, products, and services must be attentive to gender, age, disability, sexual diversity, and life-cycle needs as well as be culturally suitable and acceptable. Finally, health-related products, services, and facilities must be of high caliber and suitable in terms of science and medicine. The integration of technology innovations that enhance and promote reproductive health is necessary for this condition. Every person and organisation have the right to information about their health condition, with personal health information being subject to privacy and secrecy. They also have the right to seek for, access, and distribute evidence-based information on all facets of reproductive and sexual health. The right to seek out and share health-related information and the opportunity to participate in all choices that impact their health must be guaranteed for all vulnerable and affected groups and communities. The availability, accessibility, acceptability, and quality of healthcare services and facilities should not be restricted or hampered by private health care providers, according to states.

The right to life is recognised in Article 3 of the Universal Declaration of Human Rights (UDHR). Article 16 of the International Covenant on Civil and Political Rights (ICCPR) reiterates the right to life, while Article 6 of the United Nations Convention on the Rights of the Child (UNCRC) requires States to do all in their power to guarantee the child's survival and development. The right to life must be interpreted widely as a basic human right and as a prerequisite to the enjoyment of all other rights. States are required to take all reasonable steps to lower infant mortality rates and extend life expectancy.<sup>195</sup> The right to life of women and their children is violated by avoidable deaths related to maternal and newborn mortality. Abortions performed in violation of very severe abortion restrictions increase the risk of maternal death<sup>[5], [6]</sup>.

### **Right to equality and freedom from discrimination**

In terms of health, happiness, and human dignity, social discrimination may be seen as one of the main causes of poor health. The experiences of women, tribals, Dalits, and religious minorities who live in dread; of the crippled who are treated with indifference and isolation; of sex workers who encounter violence practically daily; and of sexual minorities who are constantly harassed are the most blatant examples of social discrimination. A social obstacle to enjoying good health and ensuring universal access to healthcare is social discrimination, which also makes it difficult to live a life of dignity. The cycle of social discrimination, marginalization, and poor health is sustained by the unequal social arrangements of society systems.

Discrimination is defined as any distinction, exclusion, restriction, or preference that is made on the basis of any factor, including race, colour, sex, language, religion, political opinion, national or social origin, property, birth, or other status, and that has the intention or effect of preventing anyone from recognising, exercising, or enjoying their rights and freedoms on an equal basis. The two types of discrimination are direct and indirect. Direct discrimination encompasses unfavorable treatment on any of the forbidden grounds where there is no analogous identical scenario and happens when one person is treated less favorably than another who is similarly situated for a reason connected to a prohibited basis. Indirect discrimination arises when laws and regulations, although first seeming neutral, adversely and disproportionately impair any individual or group's ability to exercise their rights on any of the forbidden grounds.

The right to equality and nondiscrimination is a cornerstone of all international human rights agreements and is essential to the fulfilment of all other human rights. Discrimination on any basis, including sex, race, colour, social origin, nationality, language, or religion, is prohibited under Article 2 of the UDHR, Article 2 of the ICCPR, Article 2 of the UNCRC, and Article 2(2) of the International Covenant on Economic, Social, and Cultural Rights (ICESCR). India has been asked to take greater action to eliminate caste prejudice, which may be seen as discrimination based on social background.<sup>201</sup> According to Article 7 of the UDHR, all are equal before the law and are entitled to equal protection of the law without any discrimination. Article 26 of the ICCPR affirms this right once again.

Specific types of discrimination are prohibited under other international treaties. The nondiscrimination and equality between men and women principles are included in Article 3 of the Convention on the Rights of Persons with Disabilities (CRPD) as general principles in the context of disability. The CRPD's Article 5 mandates States to take all necessary steps to revoke or alter laws, policies, practises, and traditions that discriminate against people with disabilities. It also affirms the right to equal protection under the law free from prejudice. Taking on the

intersectional and many types of prejudice that affect women with disabilities, According to Article 6, States are required to take all necessary steps to ensure that women with disabilities may exercise their rights to the fullest extent possible. In addition, States are required by Article 23 of the CRPD to end discrimination against people with disabilities in areas of family and parenting. Concern about India's lack of a comprehensive anti-discrimination statute that tackles all facets of direct, indirect, and intersectional discrimination against women has been raised by the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

The main objectives of CEDAW are to outlaw discrimination and to advance equal rights for men and women. General Recommendation 24 of CEDAW Article 12 calls on States Parties to address the problem of women's (including girls' and adolescents') overall health. Additionally, it describes the steps that States Parties must take to end discrimination against women in the area of health care in order to ensure, based on equality of men and women, access to health care services, including those related to family planning. In accordance with Article 12, States Parties are required to ensure to women appropriate services in connection with pregnancy, confinement, and the postnatal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation. According to Article 2(e), State Parties are required to take all necessary steps to end discrimination against women, including discrimination committed by private parties. State Parties are required by Article 16(1) to end any discrimination against women in laws governing the family and marriage [7], [8].

All people have the right to be valued regardless of their sexual orientation and gender identity. States have a responsibility to effectively combat homophobia and transphobia. Criminalising consenting sexual relationships between people of the same sex or the manifestation of a specific gender identity is a violation of the right to sexual and reproductive health. The achievement of women's reproductive rights depends on the duty to protect them from discrimination and to provide them with health services and facilities on an equal footing with men. States must end discrimination against women who seek medical treatment throughout their lives, especially when it comes to family planning, pregnancy, and confinement after giving birth and in the postoperative period. Discrimination against women occurs when medical services fail to take into account their unique requirements and interests in terms of reproductive health, or when the State Parties refuse to formally provide some of those demands.

Furthermore, for steps to end discrimination against women to be deemed acceptable and successful, health care systems must provide services and programmes that can prevent, identify, and treat diseases particular to women. It is necessary to legally and substantively end discrimination. The elimination of substantive discrimination necessitates that States address the underlying social and cultural norms, practises, and attitudes that limit the enjoyment of rights based on equality. States must ensure that their laws and policies do not exclude or discriminate on any of the prohibited grounds for the elimination of formal discrimination. The needs of certain groups, such as those who are poor, involved in sex work, migrant or refugee women, and women with disabilities, must be given special attention and be carefully addressed in order to achieve substantive equality.

### **Right to Information and Education**

The right to seek, receive, and impart information and ideas of all kinds is recognised in Article 19 of the ICCPR, and minors have the right to access information and materials that advance their physical and mental health under UNCRC Article 17. In order to end discrimination against

women in the field of education, Article 10(h) of CEDAW emphasises the importance of ensuring access to educational information that ensures the health and well-being of families, including information on family planning, while Article 16(e) requires the state parties to make sure that women have access to information and education that enables them to exercise their right to decide freely and responsibly on the number and spacing of children.

Information about contraceptives, the prevention and treatment of sexually transmitted diseases, reproductive morbidities, pregnancy risks, and techniques of conception must be available in order to make decisions about if, when, and how often to have children. Having access to such knowledge is also necessary for engaging in safe sex. Access to reproductive and sex education is a guaranteed component of the right to education and knowledge. Comprehensive, non-discriminatory, evidence-based, scientifically accurate, and age-appropriate education and information are required. All women, including those who are not citizens of a nation, shall have access to sexual health information, services, and education, according to CEDAW's General Recommendation No. 24.

The victims of trafficking would have access to information as a result. States should also make sure that teenage boys and girls have access to information and education on sexual and reproductive health, which must be given while respecting their right to confidentiality and privacy. Information on contraception, the dangers of unplanned pregnancies, and the prevention and treatment of STIs and HIV/AIDS should all be part of this teaching. Regardless of the parents' approval or the teens' marital status, the information must be accessible [9], [10].

### **Right to benefit from advances in science**

Everyone has the right to profit from scientific development and its applications, according to Article 15(1)(b) of the ICESCR and Article 27 of the UDHR, which gives everyone the right to partake in scientific breakthroughs and their advantages. The social and economic growth of countries and individuals has benefited greatly from advances in science and technology.

The exercise of human rights, however, may also be hindered or threatened by technology and its uses. In light of this, the UN General Assembly's Declaration on the Use of Scientific and Technological Progress in the Interests of Peace and for the Benefit of Mankind, adopted in 1975 [216], states that states must take all necessary measures, including legislative ones, to ensure that scientific and technological advancements promote the fullest realization of human rights and fundamental freedoms without discrimination.

In 2005, the UNESCO adopted the Universal Declaration on Bioethics and Human Rights, which provides guidance on the normative substance of the right of everyone to benefit from scientific progress and its applications. According to Article 15 of the Declaration, access to high-quality medical care, the provision of novel diagnostic and therapeutic modalities or products resulting from research, support for health services, and access to scientific and technological knowledge are all examples of the advantages of scientific knowledge and its applications.

Benefits from research participation should be distributed to society as a whole and should not be unsuitable incentives. The provision of treatment and services for sexual and reproductive health has been acknowledged by CESCR in General Comment No. 22. The Committee notes and emphasises that failure or refusal to incorporate medical and technological advances in sexual and reproductive health care, such as medication for abortion, management of infertility, assisted

reproductive techniques, and treatment of HIV/AIDS, would impair the quality of care. This is in reference to the State's obligation to provide good quality, medically appropriate, and up-to-date health services, goods, and information.

### **Rights to Marriage, Families, and Privacy**

The right of men and women to marry and start families is affirmed by Article 16 of the UDHR and Article 23 of the ICCPR. They emphasise equality between spouses and acknowledge the basic significance of the partners' free and informed consent to the marriage. In a same vein, Article 10 of the ICESCR views the family as the natural and essential societal unit deserving of the highest level of protection and support. It also states that Special protection should be granted to mothers throughout a reasonable time before and after delivery. This recognises the special requirements of women deriving from motherhood. Working moms should be given paid leave or leave with sufficient social security benefits during this time. Additionally, women and children are entitled to particular support, according to Article 25(2) of the UDHR.

Article 16 of CEDAW reiterates the importance of equality and consent in marriage and requires State Parties to guarantee that women enjoy the same rights to choose the number and spacing of their children in a free and responsible manner. No one may be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, or to unlawful attacks on his honour and reputation, according to Articles 12 of the UDHR, 17 of the ICCPR, 16 of the UNCRC, and 22 of the CRPD. The State must safeguard and uphold a woman's right to decide if, when, and with whom to marry in order for her to be able to exercise her rights to life, dignity, and reproductive freedom.<sup>219</sup> The age of marriage should be set such that both parties may provide their free and complete consent in order to guarantee that marriage is entered into with their full permission.<sup>220</sup> Since children cannot be deemed to have the autonomy to pick their partner or to provide their free agreement to marry, child marriage should be outlawed. Child brides are more exposed to violence, more likely to have children early and often, and are at higher risk for maternal mortality and morbidity.

They also have less bargaining power in sexual and reproductive concerns. The protection of reproductive rights and the right to be married with complete and free consent would be ensured by outlawing underage marriage. Regardless of local traditions and religious beliefs, the idea of the family should be widely construed, and women's equality in regard to their legal standing, rights, and private life must be guaranteed. Equal rights and duties for men and women in de facto relationships should apply to childrearing and child care. Equal rights for women in marriage and respect for their privacy are essential to ensuring that their reproductive rights are fully realised. The right to protection from arbitrary and unlawful intrusion into one's privacy, family, or home extends to the right to defence against attacks by both natural and legal persons non-state entities like private individuals and corporations, as well as attacks by State authorities<sup>[11], [12]</sup>.

Women's right to privacy is violated by laws that demand consent from the husband before sterilizing the wife, place restrictions on when and how many children women can have before receiving sterilization, and require medical professionals to report women who have had abortions. Women's right to privacy is also violated when private actors make women do pregnancy tests before employing them. The right of women to choose the number and spacing of their children must be respected, safeguarded, and upheld by the state. Women unfairly endure the burden of pregnancy, parenting, and associated household tasks because of women's



reproductive functions and the gendered division of labour. This directly affects their rights to the best possible level of health, education, and livelihood. Governments and partners should both respect women's autonomy in determining the number and spacing of their children, and coercive acts like forced abortion and sterilisation must be outlawed. States should relax their tight restrictions on abortion and provide access to high-quality post-abortion care as well as safe abortion services.

According to the CESCR, people with disabilities should have access to counselling services that would allow them to fulfil their rights and responsibilities within the family, and women with disabilities should have the right to protection and support. This is in response to the obstacles that people with disabilities face in pursuing their right to marriage and family life. The right of handicapped women to protection throughout pregnancy and after delivery is violated when forced sterilisation or abortion procedures are carried out on them without obtaining their informed permission.

### **Rights to reproductive health and rights in the Constitution**

The preservation and fulfilment of other human rights, such as the right to life, the right to health, the right to nondiscrimination, and the right to be safe from gender-based violence, are intertwined with and necessary for the implementation of reproductive rights. The provision of food and nutrition, the provision of employment, the supply of education, the provision of food and nutrition, and protection from gender-based violence all have laws and policies that address the reproductive rights of people and couples in India. Part III of the Indian Constitution guarantees a number of essential rights. The State is forbidden under Article 13 from passing any legislation that restricts or abridges basic rights. Some of the basic rights established in Part III of the Indian Constitution include the right to life, the right to equality before the law, the right against discrimination, and the right to freedom of speech. In accordance with Article 14, no one may on Indian soil be denied equality before the law or equal protection under the law.

The State is forbidden under Article 15(1) from discriminating against any citizen on the basis of their religion, race, caste, sex, place of birth, or any combination of those factors. The State is allowed to establish special arrangements under Articles 15(2) and 15(3) for women, children, Scheduled Castes and Scheduled Tribes, as well as any socially and educationally disadvantaged segments of people. Article 16 guarantees equal opportunity in matters of public employment and states that no citizen shall be disqualified from or subjected to discrimination in relation to any employment or office under the State on the basis of religion, race, caste, sex, descent, place of birth, or residence, or any combination of these factors. According to Article 21, no one may be deprived of their life or personal freedom until a legal process has been followed. Although the Indian Constitution does not directly identify the right to health as a basic freedom, the Supreme Court has ruled in a number of cases that the right to health and the right to prompt and appropriate medical care are essential components of the right to life.

The Supreme Court ruled in *Parmanand Katara v. Union of India*, a public interest litigation (PIL) concerning the delivery of emergency medical care to injured victims of motor vehicle accidents, that Article 21 requires the State to preserve life and that medical staff at government hospitals have a duty to provide medical assistance for preserving life. This commitment of medical practitioners cannot be revoked or hindered by any legislation, practise, or State action. According to the ruling in *Paschim Banga Khet Samity v. State of West Bengal*, the State is required to provide proper medical facilities, and it is against Article 21 for a government



hospital to refuse prompt medical assistance to a person who is in need of such care. Reproductive autonomy is a component of the human liberty protected by Article 21 of the Constitution, according to the Supreme Court in *Suchita Srivastava and Others v. Chandigarh Administration*.

It stated: It is crucial to acknowledge that reproductive decisions may be made both to have children and not have children. The most important thing is to respect a woman's right to privacy, dignity, and physical integrity. This indicates that there shouldn't be any limitations on a woman's ability to exercise her reproductive choices, such as the freedom to decline sexual activity or, conversely, the need to take contraceptives. Additionally, women are allowed to choose birth-control options including having sterilisation operations. When reproductive rights are fully understood, they include a woman's right to become pregnant, to bring her pregnancy to term, to give birth, and to nurture her offspring.

The Constitution's Directive Principles of State Policy, Part IV, has many clauses that deal with health-related concerns. According to Article 47, one of the state's main responsibilities is to promote the quality of life, nutrition, and health of its citizens.

According to Article 39(e), the State shall focus its policies on preventing abuse of children's health and strength and on preventing people from being compelled by economic need to choose careers that are inappropriate for their age or physical capabilities. States are required to take action under Article 39(f) to make sure that kids have the resources and opportunity they need to grow up healthily. According to Article 42, the State must establish policies to provide fair and humane working conditions and maternity leave. According to Article 45, the State must make every effort to provide all children with early childhood care and education up to the age of six. Although these clauses are not enforceable in any court, the State is required to employ them when creating laws and regulations since they are essential to the nation's government.

## CONCLUSION

This presentation also talks about ending harmful customs that affect women's reproductive health and rights, such child marriage and female genital mutilation. To protect people's autonomy and well-being, it emphasises the need of making extensive efforts to oppose and end harmful practises. In conclusion, this chapter emphasises the importance of human rights related to reproductive health and wellbeing as well as their wide range. Societies may endeavour to create a more equitable and fair society where everyone has access to complete reproductive healthcare and has the ability to make informed decisions about their reproductive life by recognising and supporting reproductive rights as basic human rights. The chapter is intended to serve as a call to action for governments, healthcare professionals, and activists to priorities and defend reproductive rights while promoting settings that respect each person's dignity, autonomy, and general well-being.

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## CHAPTER 24

### Assessing Key Areas of Reproductive Health and Rights: A Comprehensive Overview

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#### ABSTRACT:

The major emphasis of this chapter is on critical elements that affect people's well-being and autonomy on a global scale. It provides an evaluation of important topics within the field of reproductive health and rights. It examines a range of reproductive health issues, such as family planning, maternal health, sexual education, access to contraception, safe abortion, and the abolition of harmful customs. This research seeks to emphasize the significance of comprehensive and rights-based methods to promote reproductive health and safeguard people's basic rights by examining the advancement, difficulties, and gaps in these areas. The chapter opens by highlighting the importance of reproductive health as a basic human right, which is recognised in several international accords and declarations. It highlights the critical role that reproductive rights play in preserving people's autonomy, dignity, and control over their bodies and sexuality. Additionally, this chapter explores access to contraception and family planning. It looks at how family planning initiatives affect the rate of maternity deaths, the health of mothers and children, and the ability of people to make responsible choices about their reproductive life. The report also discusses mother health, highlighting the need of guaranteeing access to high-quality prenatal and postnatal care, qualified birth attendants, and emergency obstetric services. It looks at the difficulties in lowering the incidence of maternal mortality and the need for comprehensive maternal health policies and efforts. This presentation also discusses the role that sexual education plays in advancing reproductive health and rights. The importance of thorough sex education is discussed in connection to enabling people to make mature, educated choices about their relationships and sexual well-being.

#### KEYWORDS:

Health, Reproductive, Rights, Sexual, Well-Being.

#### INTRODUCTION

Comprehensive health rights include the rights to sexual and reproductive health. An effective public health system that can deliver comprehensive, high-quality, universally accessible health care services that are free at the point of access and, most importantly, accountable to citizens must be in place for a nation to ensure the fulfilment of these rights. Unfortunately, a number of problems, including limited public investment, inadequate infrastructure, including medical and diagnostic facilities, and underqualified human resources, pose a threat to India's public health system. Additionally, the health care industry has become more privatized and corporate in recent decades, and there has been a lack of strict supervision. This has caused a severe decline in the availability, cost, and quality of healthcare, putting more people farther away from health care on a social, economic, and geographic level, especially girls, women, and disadvantaged

groups. Additionally, the intersection of the health system and women's issues illustrates the different types of societal prejudice that have an impact on the creation, implementation, and operationalization of prejudiced health policies. Inadequate, insensitive, and harsh treatment of women—especially those from disadvantaged groups—at public health institutions robs them of their dignity and agency. Women become reluctant to seek care at public health institutions as a consequence, which affects access and reach. To protect the human rights of women, especially those who belong to marginalised and excluded groups like sex workers, LGBTIQ (lesbian, gay, bisexual, transgender/transsexual, intersex, and questioning) groups, women with disabilities, and older women, it is imperative that reproductive rights be upheld and sexual and reproductive health services are made available. By identifying the gaps in policies and programmes and providing evidence in the form of case studies and statistics, we will address the main areas of concern about reproductive health rights in this chapter [1], [2].

### Major Challenges in the Public Health Context

In addition to having one of the highest out-of-pocket costs worldwide, India has one of the lowest GDP spending on health. In India, the government spends only 1.2% of GDP, or around Rs. 1,300, on health care. As a consequence, fewer than one-fourth of outpatients get treatment from the public health care system. Over two-thirds of healthcare costs are borne out-of-pocket (OOPE), with medication costs alone accounting for 40% to 70%. About 55 million individuals are reportedly forced into poverty as a result of health care costs. According to the results of the NSSO 71st Round, which was done in 2014, the average OOPE for outpatient department (OPD) services is around Rs. 509 per illness in rural regions and Rs. 639 per illness in urban areas, with medications making up 70% of this expenditure. The OOPE for hospitalizations is Rs. 18,268 per case. The public health system's ongoing underfunding as well as the proliferation of unregulated private sector institutions are factors in the rise in household health care spending.

The lack of properly qualified medical workers is another issue that hinders India's public health system from operating effectively. The government has stopped building new medical and nursing schools in favour of allowing private institutions to meet the need for certified and trained workers. 8 percent of Primary Health Centres (PHCs), the foundation of health care delivery in rural regions, were operating as of March 31, 2016, without a single doctor. In terms of access to healthcare, especially for reproductive health, women and girls are feeling the implications and repercussions of the existing flaws in the public health system. 17.3% of women, according to the NFHS-3 (2005–06), had interacted in some way with a health professional. In India, there are just 17.9% of PHCs that provide the services of a female physician.

A comprehensive health plan called the National Health Mission (NHM) was created with the intention of assisting the states in achieving universal access to healthcare by enhancing their respective health systems, institutions, and capacities. The National Rural Health Mission (NRHM), which was established in 2005, and the National Urban Health Mission (NUHM), which was established in 2013, are the two sub-missions that make up NHM. The Government of India (GOI) provided NHM with Rs. 19,437 crore for the 2016–17 fiscal year. Despite a 2% increase over the budgets for 2015–16, this still represents a pitiful 1.18 percent of GDP spending. At first, the GOI provided 75% of the cash, with the remaining 20% coming from the states. The budget from the GOI has, however, decreased to 60% from 2015–16.

The Rashtriya Kishor Swasthya Karkyakram (RKSK), a national-level health project for adolescents, is another effort that seeks to enhance the health system in order to meet the requirements of adolescents in terms of their development and health. The initiative focuses on improving nutrition, sexual and reproductive health, mental health, preventing injuries and gender-based violence, and preventing drug abuse in the age categories of 10–14 years and 15–19 years. Despite the enormous potential that such a programme provides to increase teenage access to information and health care, nations often complain about the initiative's poor execution and lack of proper funding. On March 15, 2017, the National Health Policy was adopted by the Union Cabinet. The new policy is seen as having a mixed bag of policies, some of which reinforce the function of the public health system in the delivery of healthcare.

According to the programme, public health institutions will get a share of the planned growth in public funds, which are predicted to rise from 1.15 percent of GDP now to 2.5 percent of GDP by 2025. A significant obstacle to guaranteeing everyone's health and wellbeing is the inadequate distribution of resources. The lack of funding for the development of public health institutions is allowing the private sector to step in and thrive. However, the issue of whether the private sector can take over for the public sector still exists. Can the requirement for a cheap and efficient public health system be met by private sector initiatives? Over time, we have shifted away from supporting the public health system and towards enabling the private sector to occupy this crucial position. Additionally, it is essential to commit the necessary finances at the federal and state levels in order to even start closing the system's shortcomings. As a nation, we continue to deny the right to health as a basic freedom, and over time, this position has permeated all of our programmes and initiatives [3], [4].

Maintaining the values of inclusivity, responsiveness, and openness should be the overarching strategy for developing and implementing policies, with a focus on creating systems for public participation in monitoring, evaluation, and accountability at all levels. Citizens are denied the chance to live their lives with dignity due to limited access to high-quality health care, information, and communication, as well as other basic facilities in rural, tribal, and even urban settings—particularly in areas populated by tribal, Dalit, and migrant populations who are frequently socioeconomically disadvantaged and face social exclusion. Furthermore, the direction of the health system is generally constrained in terms of its comprehension of the rights and healthcare requirements of people with disabilities or people who identify in a variety of sexual and gender ways. This often leads to biased and unfair policies and practises that obstruct access to information and services. For instance, the binary notion of gender continues to persist throughout the health system, negatively affecting access to health treatment, despite the NALSA judgement affirming the rights of transpeople to self-determine their gender identification.

The Rashtriya Swasthya Bima Yojana (RSBY) is a state-funded insurance programme. The programme was designed with low-income (below poverty line [BPL]) households in mind. The RSBY provides up to Rs. 30,000 worth of cash-free inpatient medical treatment from accredited institutions to five family members each year. The program's goals were to increase BPL families' access to high-quality healthcare and to safeguard them financially from catastrophic medical expenses by lowering the OOPe for hospitalisation. The RSBY plan enlists public and commercial health care organisations to supply patients with services that are based on 'packages' for each service. The inclusion of both public and private institutions was done with the intention of giving patients a choice between the two different kinds of healthcare facilities.

However, the plan contains a number of design flaws. First, it solely treats inpatients, but the great majority of patients get medical attention as outpatients, particularly those who suffer non-communicable diseases (NCDs), such as diabetes or hypertension. Second, accredited private hospitals assert that the cost packages provided by the programme do not cover the whole cost of care spent by the facility; as a result, many patients are required to pay for additional medications out of pocket or with cash on top of the entitlements provided by the programme. Third, it became clear over time that the scheme's provisions were being abused to favour the participating private hospitals by over diagnosing patients and performing unnecessary procedures. A rise in needless hysterectomies—the removal of the uterus—performed by private hospitals in order to collect insurance payments was observed in many states, including Bihar, Andhra Pradesh, and Chhattisgarh.

Maternal health In India, poor maternal health continues to be an unacceptable yet serious issue. This is true despite the fact that the problem has received a lot of attention and has been the subject of GOI policies and activities as well as those of international organizations. One of the most important indicators of maternal health is maternal mortality. Maternal mortality is often seen as a measure of a country's maternal health condition, even though maternal health is much more than a question of maternal deaths alone. Even though India's maternal mortality ratio (MMR) has decreased over time, it is still quite high. Additionally, there are variances in MMR within and within states that are a reflection of the accessibility disparities to elements that affect maternal health, such as medical services. In India, maternal health issues are fragmented and only addressed in the context of institutional delivery, ignoring the larger context of sexual and reproductive rights.

## DISCUSSION

The most prevalent issues in many public health settings across the nation are the absence of ANC during pregnancy, a lack of emergency obstetric care at tertiary centres, a lack of skilled care during childbirth, inadequate equipment, a lack of drugs and blood banks at facilities, and a lack of PNC services, which all contribute to poor maternal health and high rates of maternal mortality. There are still gaps in policy on a number of issues that impact maternal health, including access to safe abortion services, access to a variety of contraceptives, respectful delivery, poverty, and nutrition. When it comes to assuring the delivery of necessary services like emergency obstetric care, there is a lack of accountability. In order to qualify for the incentive granted under the monetary incentive plan, the Janani Suraksha Yojana (JSY), women are required to travel vast distances in challenging circumstances to obtain treatment during birth. Because of this, the already subpar and insufficient prenatal and postnatal care services have been completely ignored. The high incidence of maternal death is primarily a sign of how vulnerable women are in Indian culture, which is dominated by strongly patriarchal and gender-based relationships.

The Union Ministry of Health and Family Welfare (MoHFW) and the Ministry of Women and Child Development (MWCD) are now implementing a number of programmes to address maternal health concerns. Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A): RMNCH+A was established in 2013 with a 'continuum of care' approach to the health requirements of adolescents, mothers, and children. This requires the delivery of health services to people during different life-cycle phases, including childhood, adolescent, reproductive age, pre-pregnancy, birthing, and postnatal, in a coordinated and integrated manner.



The 'continuum of care' strategy also integrates service delivery in settings where medical treatment is given, such as at home, in the community, and in medical institutions. According to the RMNCH+A method, there are three main causes of maternal mortality: medical, socioeconomic, and health system-related variables. Hemorrhage, infections during pregnancy, labour, and the postpartum period, and unsafe abortions are some of the medical reasons of maternal death.

In 2005, the MoHFW introduced JSY as a way to encourage institutional delivery via financial incentives. The nationwide programme provides monetary help to expectant mothers and moms for post-delivery care. While all pregnant women, including those from Scheduled Castes and Scheduled Tribes, are eligible for the JSY in low-performing states, the scheme in high-performing states also covers pregnant women who are at least 19 years old, come from BPL families, and are from all Scheduled Castes and Scheduled Tribes. ASHAs, or Accredited Social Health Activists, are the scheme's primary actors. The ASHA was in charge of locating expectant women, providing them with counselling, facilitating antenatal care (ANC), accompanying the ladies throughout institutional birth, arranging for transportation to the health facility at the time of delivery, and ensuring that the women received the monetary support. The approach or justification of JSY was founded on the conviction that the suggested incentives would encourage more expectant mothers to register their pregnancies, get ANC, be monitored for problems, and give birth safely in facilities. In order to transfer women from rural and far-flung places to adjacent institutions, states additionally established emergency ambulance services (under the 108 Seva, subsequently changed to the 102 Seva)[5], [6].

The sole concentration on institutional delivery has, however, resulted from the financial incentive system's connection to institutional delivery's success, diverting resources away from ANC and even postnatal care (PNC), which has created new issues. The quality of treatment has also been compromised as a result of the public health institutions' inadequate infrastructure and human resource levels. The failures of such an approach are demonstrated by the case of maternal deaths of women from marginalised communities in the Barwani district of Madhya Pradesh as a result of unnecessary referrals, institutional inadequacy and lack of preparedness in handling large numbers of institutional deliveries, and lack of attention to ANC and PNC. Even though this is the most essential time period for mortality, post-partum care is not provided. Despite intentions to set up blood banks in every district and blood storage facilities in every First Referral Unit, the need for blood continues to be a serious gap. In order to promote overall wellbeing and offer free ANC for expectant mothers on the ninth of every month throughout the country, MoHFW introduced the PMSMA in 2016.

PMSMA aims to improve ANC services by enlisting the help of the private sector. This casts doubt on both the future expansion of the programme to incorporate user payments for ANC services as well as the availability of skilled healthcare personnel in the public sector. This demonstrates how insufficient the ANC services now offered via outreach and at public health facilities are the strategy of confining this service to certain government health facilities raises concerns about its accessibility, particularly for women living in remote areas. To fulfil the quality criteria that the public health system is unable to reach, the programme invites private sector participation both as pro bono partners and as outsourced partners. However, this strategy calls into question the accessibility of healthcare for everyone, since it suggests a change in the government's function from service supplier to service purchaser. It denotes the transformation of health care from a public good to a private good and the introduction of user fees for formerly

free services. The Pradhan Mantri Matritva Vandana Yojana, which was introduced in 2017, aims to enhance the beneficiaries' health-seeking behaviour by depositing a cash incentive of Rs. 5,000 directly into the accounts of Pregnant Women and Lactating Mothers (PW&LM) for the first living child of the family. After institutional delivery, the qualified beneficiaries will get the remaining monetary incentives in accordance with the authorised rules for maternity benefits under JSY, averaging Rs. 6,000 per woman. Implementation of current plans: The actual situation Despite these different plans and initiatives, the NFHS-4 (2015–16) data shows that just 21% of women nationwide have obtained complete ANC. The enormous gap between the various areas may potentially be becoming wider. The disparities between various geographic areas and their effects on women's reproductive rights and health are grave concerns [7], [8].

The provision of ANC is a vital opportunity for health professionals to provide care, support, and information to expectant mothers, including but not limited to the identification and prevention of illnesses, as well as to assist women who may be enduring domestic or marital abuse. A further key problem that prenatal exams seek to detect and treat in an effort to improve mother and child health is anaemia. However, the figures show that about 20% of Indian women now have BMIs below normal, and nearly 50% of both non-pregnant and pregnant women in the nation are anaemic.<sup>247</sup> According to NFHS-4, only 33.3% of moms used iron and folic acid supplements for 100 days or more while they were pregnant. The current situation shows that it is necessary to start programmes to increase coverage and to set up effective monitoring and evaluation mechanisms for underperforming jurisdictions.

Furthermore, according to NFHS-4, only 36.4% of women who gave birth in a public facility got financial aid under the JSY programme, and the average OOPE in a public health facility is still as high as Rs. 3,198 per delivery.<sup>248</sup> Despite the existence of health programmes like JSY and JSSK, research on high spending on maternity care in India (2016)<sup>249</sup> found that just 0.14 percent of the 14,482 births examined resulted in no expenses. The analysis shows that the JSY's maternity entitlements are insufficient to prevent catastrophic maternity care expenditures; the average cost of maternity care was discovered to be 10 times more than the value of the JSY voucher. The findings suggest that there are also a large number of indirect costs, such as lost wages for accompanying family members, which adds to the financial load on the family with a low socioeconomic status. Despite the implementation of some of the aforementioned strategies, survey data indicate that OOPE on maternal health has not decreased.

This was amply shown in the case study of Farida Begum, a 21-year-old Assamese lady who passed away at the Silchar Medical College and Hospital (SMCH) while giving birth to her first child. Her tale serves to show the widespread and harsh circumstances that force individuals to incur significant and burdensome OOPE. For over a year, Farida had been married. Her first pregnancy, in fact. She had two ANC check-ups and was enrolled at the Banskandi primary health facility (PHC) in Assam. She was given 100 iron pills and a tetanus shot during the ANCs. Farida started having labour pains on June 24 around 3 o'clock. When Farida was due, her husband requested the ASHA employee to accompany the family to the Banskandi PHC. Although the PHC was just two km from where they lived, the ASHA advised them to wait until the morning. Later, Farida's husband requested an ambulance, but none was available that day. Farida was forced to wait through the night in discomfort since there was no ambulance or other kind of transportation.

Around six in the morning the next day, Farida's health became worse. When she and her husband finally made it to the PHC, they discovered that neither a doctor nor a nurse were on duty. Only around 10 a.m. would the doctor and nurses show up. Farida was evaluated by the PHC's Medical Officer (MO), who came a bit later. He advised that she and her husband stay there for the birth. The doctor declined the family's request for a second examination of Farida. The birth and episiotomy were handled by the general nurse and midwife (GNM). A baby girl was born by Farida. But at 4:00 p.m., the physician sent Farida to the SMCH due to problems. Due to the strike by the 102 ambulance drivers, the PHC was unable to arrange a vehicle to take Farida for the referral.

However, the doctor gave the family some cash so they could take a private car to the Christian missionaries' managed Emanuel Rural Hospital. Farida kept bleeding throughout this period. Given the bad state of the roads leading to Silchar and the missionary hospital's close proximity to the SMCH, which is about 27 kilometres distant and practically difficult to get to on time due to the horrible roads, her family chose to travel there instead. At 5:30 p.m., they arrived to the missionary hospital. There, Farida Begum was admitted. Her health worsened on February 25 at around 4:30 in the morning, and she was finally sent to SMCH. The family then drove her to SMCH in a private vehicle they had rented. Farida got seven blood units at SMCH. Blood had to be procured, costing Rs. 3,300 per unit, by her husband. He spent a total of Rs. 23,100 on blood. He borrowed money from his family members to pay the bills. Farida was still being monitored by the hospital, but she passed away on February 28 at 6:15 o'clock. The case of Farida Begum shows how several basic rights granted by the Indian Constitution have been violated, since the state neglected to give the necessary medical care to save her life. She encountered two fatal delays for referral from the PHC to the Emanuel Rural Hospital and then on to SMCH due to the lack of experts and gynaecologists. Further delays were brought on by the absence of ambulance service[9], [10].

The quality of treatment is still a major problem despite the rise of institutional services in recent years. Ineligible women from oppressed caste groups and distant locations are still left out of public health initiatives. In addition to being handled as part of a continuum with other restrictive policies and programmes that address the socio-political context of health, maternal health has to be addressed within the greater context of the nation's crumbling health institutions. The lack of mobility of schemes between states, particularly in the context of interstate migration, the overlap of schemes, and the inadequacy of data gathering under JSY are the main areas of concern. In the matter of *Laxmi Mandal vs. Deen Dayal Harinagar Hospital and Ors*, the Delhi High Court cited these deficiencies. If a person is declared below the poverty line (BPL) in any state of the country and is using the public health services in any part of the country, such person should be assured of continued availability of such access to public health care services wherever such person moves, the directive said.

The Delhi High Court recommended improving the system of referral to private hospitals, identifying a location where the woman could take advantage of all programmes related to maternal and infant health, calling for the establishment of monthly camps in rural areas for health check-ups of pregnant women and infant children, and calling for prompt ambulance service to and from the woman's home and the health facility. In addition, the court ruled that a woman who stays at home with her children should be acknowledged as the family's major provider under the National Family Benefit Scheme and that, in the event of her death, her family should be eligible for the monetary benefit.

Farida Begum's untimely passing emphasises the urgent need to enhance the health care infrastructure, the capabilities of human resources, and the standard of care at all levels of healthcare institutions in addition to improved transportation and consistent blood supply availability. Her death was brought on by the lack of access to competent medical care, including the absence of medical professionals and ambulance services at the time of her birth, which came at a cost that made her husband borrow money from his family to pay for her care. This case study makes it very evident that the metrics used to gauge and track maternal health are not based on information about the efficacy of treatment or other data, and they entirely disregard the women's first-hand accounts of their own experiences. One of the main pillars for developing, revising, and enhancing the nation's reproductive health policy must be the women's real experiences with the healthcare system.

### CONCLUSION

As a crucial component of reproductive rights, the chapter also touches on the thorny topic of safe abortion. It looks at how crucial it is to provide safe and legal access to abortion services and how crucial it is to fight stigma and prejudice towards abortion. The efforts being made to end harmful practises that have an adverse effect on reproductive health and rights, such as child marriage and female genital mutilation, are also highlighted in this chapter. In order to safeguard people's autonomy and well-being, comprehensive solutions must be used to address and end these harmful behaviours. The main point is that in order to inform comprehensive and rights-based policies and programmes, it is crucial to evaluate major aspects of reproductive health and rights. Societies may strive towards ensuring that all people have access to high-quality reproductive healthcare and can make educated decisions about their reproductive life by addressing the problems and gaps in these areas.

The chapter serves as a call to action for governments, healthcare professionals, and activists to prioritise and preserve reproductive health and rights, therefore building a more fair and just society where all people may enjoy their reproductive rights and have the best possible well-being.

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## CHAPTER 25

### **The Role of Maternity Benefit Programs: Empowering Women and Supporting Families**

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#### **ABSTRACT:**

An evaluation of maternity benefit programs within the larger framework of reproductive health and rights is provided in this chapter. It looks at how crucial maternity benefits are to protecting women's health, advancing gender equality, and maintaining women's rights throughout the crucial stages of pregnancy, delivery, and afterwards. This research intends to highlight the need of comprehensive support systems to promote the wellbeing and empowerment of women and their families by looking at international efforts, legislative frameworks, and the effects of maternity benefit programs. The chapter opens by emphasising the complexity of reproductive health and rights, with a focus on maternal health in particular. It highlights the risks that expectant mothers confront and the need of addressing their particular health needs and rights throughout the reproductive process. This chapter also explores the fundamental elements of maternity benefit schemes. It looks at the policies relating to paid maternity leave, access to high-quality prenatal and postnatal care, maternity payment benefits, and breastfeeding assistance in the workplace. The report also discusses how crucial it is to make sure that women from all socioeconomic levels and underrepresented areas may access and benefit from these advantages. The chapter also examines how maternity assistance programmes affect outcomes for mother and child health. It examines how paid maternity leave affects stress reduction, breastfeeding success rates, and mother mental health. The research also looks at how financial assistance and access to high-quality maternity care might help lower maternal death and morbidity rates. Additionally, this chapter emphasises how international organisations, companies, and governments promote and execute maternal benefit programmes. It examines effective implementation and sustainability problems as well as successful models from various areas.

#### **KEYWORDS:**

Health, Maternity, Reproductive Health, Rights, Sexual.

#### **INTRODUCTION**

In India, 95% of women who work are employed in the informal and unorganized sectors; they are not paid during their pregnancies or after they give birth, though they are expected to rest, put on weight, and improve their own health before exclusively breastfeeding their infants for six months. According to the Economic Survey 2016–17 (Ministry of Finance, GOI), 42.2% of Indian women start out too thin and don't gain enough weight during pregnancy. It is advised that maternal and early life health and nutrition interventions yield some of the highest economic returns to public investment in human capital in India. Although there are multiple programmes and legislation that provide maternity benefits in India, in practise, more than 90% of working



women in this nation have little to no access to these benefits. Even more concerning, it is impossible to determine who is getting the allocated maternity benefits in the absence of any data. Since the passing of the National Food Security Act (NFSA), 2013, all pregnant and nursing women (apart from those employed by government or public sector organisations) have been legally entitled to maternity benefits of at least Rs. 6,000. The Maternity Benefits Programme (MBP), which goes against the NFSA's principles, was authorized by the government in 2017. First of all, it is only applicable to the first birth.

This need has no reason other than the necessity to minimise financial responsibilities. Conditions like the two-child rule and the marriage age have been shown to fundamentally discriminate against both women and children. These conditions particularly harm and endanger the lives of the most marginalised and vulnerable women, who are primarily members of socially discriminated communities like the Scheduled Castes (SC), Scheduled Tribes (ST), and minorities. Second, the MBP was integrated with the JSY in an unjustified move that further connected it to institutional delivery, perhaps to further cut the money allotted. The MBP is designed to provide wage compensation, just like it does in the formal sector, and has been included in the NFSA as a minimum incentive of Rs. 6,000 for that purpose alone. In contrast, the JSY is an older scheme that was launched with an entirely different purpose, which was to incentivize institutional deliveries. According to the most recent NFSA statistics, 21% of children born at home are not eligible for the JSY [1], [2].

Maternity leave now lasts 26 weeks instead of the previous 17 weeks as a result of a recent amendment to the MBA. Although this was a positive step, the MBA only covers roughly 18 lakh women in the organised sector, even though India has more than 2.7 crore deliveries annually. More than 95% of women in the nation work in the informal sector, yet this is not covered by the MBA. It is intolerable that the standard for the remaining women in the nation should be a pay compensation of less than half of the minimum salaries, and that too only for one birth, after the necessity of six months of paid leave for women in the formal sector (public and private) has been adopted. Contrasted to the paid leave of more than six months provided in the formal sector, the meagre maternity payments under the MBP barely equal five weeks of the state's minimum salary. Given the MBA modification, receiving such a meagre income would, in reality, constitute discrimination and inequality before the law in violation of Article 14 of the Constitution. The right to maternity leave for women in all fields must be universal and unconditional, and it shouldn't be contingent on a woman's age or the number of children she has given birth to since these factors are inherently biased against both mothers and children.

### **Informational Access and Use of Contraception Services**

The fulfilment of women's reproductive rights depends on securing access to readily accessible, palatable, and thorough information on safe contraception and services that is free from coercion, discrimination, and violence. Several human rights, such as the right to life, the right to the best possible standard of health, the right to choose how many children to have and how close together they should be, the right to privacy, the right to information, and the right to equality and non-discrimination, as discussed in earlier sections of this report, recognised the right to comprehensive information about contraception and safe, quality contraceptive services.

According to CEDAW, women must have information about contraceptive measures and their use, and guaranteed access to sex education and family planning services women must have information about contraceptive methods and their use. In order to uphold human rights related

to reproductive health, the International Conference on Population and Development's (ICPD) 1994 Programme of Action highlighted the need of contraceptive information and services. Additionally, according to the Committee on the Rights of the Child, States parties should provide adolescents with access to sexual and reproductive information, including on family planning and contraceptives, the risks of early pregnancy, the prevention of HIV/AIDS, and the prevention and treatment of sexually transmitted diseases (STDs)[3], [4].

## DISCUSSION

For a person to exercise their reproductive autonomy, decide whether and when to have children, and choose the spacing of children freely and responsibly, accurate information about contraceptive options, including information about potential side effects and failures of contraceptive methods, is a prerequisite. A woman's right to privacy, dignity, and physical integrity should be protected, according to the most important factor. This indicates that there shouldn't be any limitations on a woman's ability to exercise her reproductive choices, such as the freedom to decline sexual activity or, conversely, the need to take contraceptives. Women are also allowed to choose their preferred methods of birth control. Unfortunately, the main driving force behind the country's family planning effort has been the assumption that restricting women's fertility would regulate or stabilize the population rather than guaranteeing their rights to have safe and meaningful sexual encounters. In order to direct preference for long-term, permanent contraceptive techniques with a major emphasis on women, this continues to drive the family planning programme and access to contraception. The table below, which is highly gendered and has a focus on long-term contraceptive options for women, makes this clear. According to trends in both present and historical usage of contraceptives, female sterilization is the most common technique, with 37.4% of women reporting it, and it has been used by 66.0% of currently married women throughout their lives. Condom, IUD, and pill use were each used by 11.1%, 6.3%, and 13.9% of people, respectively.

According to the statistics, sterilization was performed on women on average when they were 25.5 years old, and 81% of them were under the age of 30. Given that a large proportion of women are becoming sterilised at a young age, it is important to emphasize the availability of permanent means of contraception rather than short-term ones. The research also shows that the percentage of males who use both temporary and long-term methods of contraception is almost nonexistent. In India, there is a 12.9% overall unmet need for family planning, and a 5.7% unmet need for spacing (NFHS 4). Women and adolescents in particular are unable to manage their fertility and reproduction or protect themselves from HIV and other STIs because of the unmet demand for access to contraceptive information and services. Furthermore, since family planning has traditionally been seen in terms of marriage and reproduction, access to contraception is hampered or stigmatised for children, teenagers, single women, and those who are not married.

### Right to information and services

India is required to make sure that information and services for contraception are accessible, accepted, and of high quality as a signatory to many international human rights accords and protocols. These services must be devoid of pressure and bias. To allow educated and independent choices on contraception, comprehensive information must be made accessible as a right to everyone, regardless of marital status. Systems that guarantee that the public health system provides access to contraceptive knowledge and services while allocating enough resources to build the infrastructure of the public health system and the capacities of the health

care workers at different levels of the health system to provide contraception knowledge and services in a non-discriminatory manner and free from practises that violate people's human rights, such as condom distribution. There is a severe lack of comprehensive information regarding contraceptives, especially information on potential negative effects. Obstacles to accessing contraceptive information and services on a legal and practical level result in unintended pregnancies, increase the risk of unsafe abortions, or cause maternal mortality and morbidity, which are violations of the rights to life and health.

Data show that consumers of contraceptives have unreasonably little access to information. Women who used modern contraceptive methods were asked if they had been told about the method's potential side effects or problems; 32.2 percent of them responded in the affirmative; 26.0% said they had been told what to do if they experienced side effects; and 27.9 percent said they had been told about alternative methods they could use. The NFHS3 found that female sterilisation users were the least likely to be educated about the implications of the procedure, other alternatives, and what to do if they encountered adverse effects[5], [6]. According to the most recent statistics available, 46.5% of current users have discussed negative impacts of the technique they are employing, and the majority of current users are women in the nation (NFHS 4).

One such group is young people or teenagers, who typically face considerable obstacles that increase their chance of unwanted pregnancy as well as their risk of obtaining HIV, STIs, and other diseases. Adolescents are discouraged from using contraception, when necessary, because of the stigma associated with teenage sexuality or the necessity of parental authorization. Since women typically don't have their own source of income or control over their money to be able to buy contraceptives, the cost of getting contraceptive treatments might potentially be a big barrier. Contextualizing informed consent and autonomy in the use of contraception. In the absence of access to thorough information about the contraceptive method, the contraindications, the risks, the potential negative effects, and the alternatives available to the woman who is accessing contraception, the autonomy of women to make informed decisions about contraception is severely restricted at the point of the health system.

Contraceptive goals and forceful administration of contraceptive techniques violate women's rights, health, and well-being while also violating the concept of informed consent. These kinds of violations are prevalent and reflect the way the health system is set up since it is believed that women's bodies, particularly those from disadvantaged areas, may be used to regulate reproduction and serve as contraceptive targets. All of these problems that affect access to reliable, safe contraception are reflected in the case study that follows. Contrary to what some family members claimed, the hospital was exonerated in the police investigation. According to the police, the incidence of death was a normal death and that such deaths keep happening during linked to maternal deliveries and child birth, thus they declined to file a FIR. Anjali Devi's husband made many efforts to file a FIR against the hospital at the neighborhood police thana on November 23, 2016, but was ultimately successful with the help of the local organisation and community members.

It was stated in the maternal death report that she passed away from postpartum haemorrhage (PPH). The PPIUCD administration by the hospital clearly violated Anjali Devi's right to free and informed consent to contraception as well as the applicable guidelines for PPIUCD in this case. The family members strongly believe that Anjali Devi had likely passed away on her

hospital bed itself before the hospital authorities insisted that she be taken to the DH. According to the MoHFW (2010) PPIUCD reference handbook, obtaining the woman's informed permission is necessary before inserting the PPIUCD: the PPIUCD must only be placed after the woman has been counselled and has given informed consent.<sup>263</sup> Additionally, in accordance with the WHO Medical Eligibility Criteria, the woman must undergo clinical screening for conditions such as the high individual risk of PPH. This screening should occur throughout the prenatal period as well as just before insertion and in the right after delivery. However, it is clear from the lack of any documentation at the institution that Anjali Devi was not checked for PPIUCD either during ANC or in the hospital.

The maintenance of family planning technique objectives at the level of health facilities was of more importance. When questioned about the anticipated level of performance (ELA) for the hospitals under family planning during the hospital visit to Barari referral hospital, the hospital staff disclosed that the ELA for IUCD is 267 for one month, which was the same aim for sterilisation as well. Around 10–12 births a day, or 250–300 per month, are delivered in the Barari hospital. However, in contrast to IPHS standards for a FRU facility, the hospital lacked a blood storage unit. This brings up concerns about the staff's abilities to address PPH or other difficulties needed at a FRU [5], [6]. This case included a grave violation of the freedom to make decisions without compulsion, with full knowledge and counselling. Additionally, in the framework of PPIUCD, compensation for such a death is not accessible. Compensation is only payable in cases of failure or fatalities after sterilization.

### **Sterilisation: A Human Rights Violation in the Camp Approach**

The tragic deaths of 13 women, all of whom were in their 20s or 30s, and the critical condition of 70 other women after laparoscopic sterilisation procedures in camps held in November 2014 in Bilaspur district, Chhattisgarh, raised serious concerns once more about the callous treatment of women, the poor, and the marginalised, as well as the obvious violations of ethical and quality standards in the healthcare system. The tale that follows is based on interviews with Rekha's family members, who was one of the 13 ladies who had passed away.

### **Failure to follow norms and recommendations**

In *Devika Biswas*, the Supreme Court acknowledged the existence of an unofficial system of objectives for the sterilising plan and that it is practically a relentless campaign for female sterilisation. It argued that the low rate of male sterilisations was due to the fact that males received less encouragement to get sterilisation than women. On the basis of gender fairness, it instructed the Union of India to solve this problem. The Court also determined that the sterilising practises under consideration endangered a person's right to health and reproductive freedom, both of which were crucial elements of their right to life under Article 21. Importantly, the Court called attention to the negative effects that State policies such as establishing informal targets and providing incentives for sterilisation have on the reproductive rights of vulnerable groups, whose deplorable socioeconomic circumstances render them vulnerable to coercion and devoid of meaningful choice.

The Court ruled that gender neutrality must be achieved in sterilisation policies and incentive programmes, and that unnecessary focus on female sterilisation discontinued in order to cease discrimination and promote substantive equality. The Court additionally ordered each state and union territory to make sure that no objectives are set and that no one is coerced into having

sterilisation in order to reach their targets by health staff. When women have sought administrative or judicial relief for the infringement of their human rights with regard to their life and health, the grievance redressal systems have likewise shown to be insufficient. The way the accused doctor was released on technical grounds in the Bilaspur High Court ruling in the matter of the sterilisation-related deaths of 13 women is an illustration of this [5], [6]. It is significant to note that numerous inquiry committees, including a judicial commission, factual findings by human rights activists, and members of civil society who investigated the case and documented the issues highlighted the operating doctor's flagrant disregard for government norms and guidelines. The laparoscopic tubectomies were conducted by Dr. R. K. Gupta, who utterly failed to take the essential measures against infections when performing sterilisation procedures.

Such instances of flagrant abuses of women's human rights point to the health system's disregard for a number of established standards and recommendations that have been accepted by the Ministry of Health and Family Welfare. In *Ramakant Rai and Anr v. Union of India and Ors* [267] in 2005, the Supreme Court issued guidelines governing the sterilising of both men and women. The Supreme Court had ordered the establishment of a system of sterilisation in states, districts, and regions, requiring doctors to complete a checklist of patient information relating to age, health, and other relevant information, and setting up a State Quality Assurance Committee, which would monitor compliance with guidelines for pre-operative measures, operational facilities, and post-operative care. In circumstances when patients passed away or had post-operative problems, the Court had also mandated compensation.

Even if the strategy approach (2013) for the family planning programme under NHM presents a target-free approach based on unmet requirements for contraception, places equal emphasis on spacing and restricting techniques, and promotes children by choice in the context of reproductive health [268] The insertion of post-partum intrauterine contraceptive devices (PPIUCD) after institutional births and post-partum sterilisation are being given significant attention as a key area for action in post-partum family planning. The ongoing worries regarding the state's obsession with population stabilisation and its coercive and targeted provision of contraceptive methods remain very relevant, especially in light of the fact that the protocols and guidelines intended to protect the rights of those utilising contraceptive services are largely not being implemented. The Family Planning Indemnity Scheme (FPIS) was established by the Government of India (GOI) to provide for compensation in the event of death or failure as a consequence of sterilising procedures. [269] Evidence, however, indicates significant implementation flaws [7], [8].

### **Refusal to sterilize**

Access to high-quality contraceptive treatments from public health institutions is also hampered for women and girls, especially those from low socioeconomic backgrounds, by restrictive governmental laws and/or administrative processes. The case study that follows is an illustration of how the government's restrictive policies have prevented Chhattisgarh's Baiga tribal women from enjoying their legal and constitutional rights to reproductive autonomy. The government's policy designating the Baiga as a protected tribal group is the cause of this refusal, which prevents them from having access to sterilization services. The Department of Public Health and Family Welfare, Government of Madhya Pradesh, first issued a government order in 1979 that restricts access to sterilisation services for tribal people who belong to specific communities. These individuals were previously known as primitive tribal groups (PTGs), but are now



administratively classified as particularly vulnerable tribal groups (PVTGs). Ironically, this directive is no longer in effect in Madhya Pradesh, where PVTG groups are receiving sterilising services, but it is still being carried out in Chhattisgarh, which was once a part of Madhya Pradesh until 2000. Given that the state aggressively promotes sterilising on the one hand, and on the other adopts a pro-natalist posture and entirely refuses the services to a disadvantaged minority and violates their rights, it is contradictory.

In order to protect women's and girls' reproductive rights, it is essential that they have access to voluntary contraceptive services and information. These services give women the freedom to choose whether to have children as well as how many and how far apart they should have them, preventing unwanted pregnancies and lessening their negative effects on their health and wellbeing. However, it is crucial to ensuring that standards of care are upheld and that the use of contraceptive techniques is informed and voluntary. The GOI budgets and programmes, although referring to contraception, really support female sterilisation. Evidence is overwhelming that, despite women's continued ignorance of the risks and potential problems of the surgical operation, female sterilisation remains the technique that is promoted by government schemes. As a result, they are unable to make an educated decision. Similar problems surround the current promotion of post-partum IUCDs; it appears that women are not being informed about these devices during the prenatal period, and insertion occurs without their full and informed consent, sometimes even without their knowledge, only to be discovered later as a result of an infection or a related medical condition.

Despite the fact that there aren't any objectives as defined by policy, they guide how programmes are carried out. Additionally, Quality Assurance Mechanisms required by Court rulings are still being disregarded. A thorough method for quality assurance has been given out in the Guidelines on Female Sterilisation published by the Government of India in 2005. Standards of care infractions persist in spite of this directive. This is evident from the fact that 13 women who had undergone surgery in Chhattisgarh in November 2014 died. Furthermore, a population that is mostly young is not appropriate for the state's concentration on terminal contraceptive measures. Men's disregard for their need to use birth control worsens the ongoing infringement on women's reproductive health and rights. According to statistics, the percentage of female sterilisations as a share of all yearly sterilisation procedures (male or female) climbed from 78.6% in the early 1980s to 98.1% in 2015. Similar to this, the budgets have placed an unwarranted emphasis on female sterilisations [9], [10].

## CONCLUSION

This looks at the role maternity benefits have in improving women's empowerment and gender equality. It goes through how giving women maternity benefits might help them manage work and family obligations, escape the cycle of poverty, and become financially independent. This summary highlights the significance of maternity benefit programmes in advancing reproductive health and rights in its conclusion. Societies may endeavour to ensure healthier pregnancies, safer childbirths, and greater wellbeing for women and their families by offering comprehensive assistance to expectant mothers and new moms. The chapter is a call to action for stakeholders and policymakers to prioritise and fund maternity benefits as crucial elements of reproductive health and rights, promoting a more equal and empowering environment for women globally



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