Dr. Poonam Sharma, Associate Professor, Department of Social Sciences, Vellore Institute of Technology
Dr. Rekha Wagani, Associate Professor, Universal AI university School of Liberal Arts: Behaviour and Social Sciences, Maharashtra

Being parents in India: from family planning to family parenting

Child rearing practices



Picture 1: Newborn Baby Rituals
Credits: all the Pictures in this lesson were taken by the authors

Introduction

Parenting is not just the parent's business

DECISION MAKING IN CHILD-REARING

In India, parenting begins with a couple's marriage. Childbearing is regarded as one of the indicators of a successful marriage. However, the Indian family's idea of Parenting in its truest sense is when the whole family raise a child or children with the support of an extended family.
Children are considered vital in India, considering the religious and collective social systems (Mullatti L., 1995 & Gopalan, 1996). Children are commonly regarded as a means of providing security for elderly parents and other members of the extended family.
In the new generation, a common scenario in India is that parents fulfill children's needs and wants for longer, which may extend into adulthood. The common Indian notion is that a child is perceived as the potential figure to carry the family lineage and tradition to the next generation.

All elders in and outside the family influence newly married couples to begin their journey of parenthood as early as possible (Breton, 2020). Within a year, the elders and relatives in the family expect to hear good news.

Indian parents do not hold exclusive authority as decision-makers for their children. According to Breton (2020), within the context of an average household, adults maintain their role as primary decision-makers throughout a child's lifespan, even when the child reaches adulthood at forty. According to Keller and Otto (2009), children must exhibit obedience, adhere to family rules and regulations, and demonstrate interdependence.
The responsibility for making decisions regarding a child's education and other important matters lies with the senior male members of the family. The child in this context is perceived as primarily being passive recipients of the suggestions. Certain decisions are considered fixed, commonly called parental beliefs (Tuli, 2012). These beliefs serve as guiding principles in matters concerning the child. Additionally, other decisions are influenced by family traditions. In nuclear family structures, gender roles are less rigid, with fathers assuming significant roles in child-rearing (Sriram & Navalkar, 2013).

Examples of child-rearing practice?

PROTECTION FROM THE "EVIL EYE"

Preventive Parenting is the apt terminology for parents in India. It is a common belief across regions and religions in India that both mother and child are subject to the evil eye, which may bring misfortune to the mother and child in the form of disease, ailment, behavioural issues, and hurdles in achieving the common milestones (Mohyuddin & Awan 2015). It is the duty of parents to keep their children away from the negative forces, which are commonly known as evil eyes. There are various ways to keep these evils away from the child, such as tying a black thread on the hands and feet and putting a "Kajal" dot on the cheeks, chin, and forehead, which are common across the regions (Patel & Trivedi 2023).
The child is also saved from the negative forces by moving rock salt in a clockwise and anti-clockwise direction, spitting, and burning dried chillies. The elders and family well-wishers typically orient parents to identify the signs of negative vibes in the child, such as excessive crying, not eating properly, irritability, inability to sleep, and frequent sickness.
These rituals and medical treatment are important to ensure the child's well-being.



Picture 2 : Kala Tika for preventing evil eye

What does it mean to be Pregnant in India?

Pregnancy and birth rituals



Picture 3: Garbh Sanskar (8th Month Pregnant Women Ritual)

Pregnant women get special status and respect because the child born through them will carry the family lineage ahead. In many regions, pregnant females go to their parent's home in the seventh month and deliver the baby there. Yet in some regions, females spend their pregnancy at their In-law's house and are sent to their parent's house after one month of delivery. The pregnancy is kept secret during the first three months, only shared amongst close family members. Almost all known or unknown people will be ready with their special advice on what to do, what not to do, what to eat, and what to avoid.

As per the ancient Vedic rituals, two samskaras at two different times of pregnancy are performed (Gupta, Jain & Pathak 2022). The first samskara is "Punsvan Sanskara" which is done for healthy progeny. The family makes a kind of announcement to the community for the upcoming child. In the seventh month, a special ritual of **"Simantonayan"** in Hindu families and other religions and regions, as per their beliefs, like the Western "baby shower" ceremony, is performed. The delivery expense is typically expected to be borne by the mother's parents, but few exceptions exist.

We in India believe that the **"Garbha Sanskar"** ritual is a way to educate the unborn child in the womb for the holistic well-being of the "child and mother" embedded in spiritual and religious teachings (Deshpande, 2016; Hajare, & Dave, 2019). Various research has shown post-well-being improvements after these samskaras (Deshpande, 2016). In some places, this event is celebrated on a large scale.

Pregnant women follow a specific nutrient, diet and lifestyle known as Garbhini Paricharya. She is expected to be happy, read good books, listen to spiritual discourse, and eat digestive and fresh cooked food for the offspring's physical, psychological, and spiritual development. The family is responsive towards pregnancy cravings as it is believed that if the mother's craving is not satisfied, the infant will drool. Considering all health parameters of the mother and child are good, the mother would be suggested to be involved in household chores, specifically mopping, to improve flexibility and strengthen the pelvic muscles (Gujarathi & Gujarathi, 2019).

Restorative seclusion and birth rituals

There are indirect restrictions on the new parents' sexual life during the first forty-five days. In some religions, such as Hinduism and Islam, no religious activity occurs in the home for twenty to forty days, considering the post-delivery menstruation beliefs. Regionally and religion-wise, people follow their own durations of the new mother seclusion. Whereas in some religions like Sikhism, there are no such beliefs relating menstruation and vaginal delivery to the state of being "unclean" or "pollution".

The fifth and sixth day is considered important in Hindu families, as there is a belief that the Child's fate is written on this day. Special **pooja** "Prayer" is performed on this day. **Kajal** (Kohl) is applied in the eyes of the child.

On the tenth day, a special **"Hawan"** is performed. Based on the astrological calculation, the family **"Pundit"** makes the child's horoscope.

Preferences for childbirth and initial care

Mostly, hospital deliveries are preferred, yet there is a significant gap in the rural, poor, and tribal populations accessing these health facilities. Vaginal delivery is preferred over caesarean with the common belief that it strengthens the mother-child bonding. But nowadays, some women prefer caesarean deliveries over vaginal birth. Families plan delivery as per their religious and cultural beliefs on an auspicious day and time. Many Ayurvedic and traditional practices are adopted even in hospital delivery. This starts with a practice called "**Ghutti",** usually a drop of honey. It is a common belief, irrespective of the religion, that the child imbibes the nature of the person who gives the first **Ghutti.**

The postpartum confinement is when the new mother is given one month to forty-five days of rest with a high-fat diet like butter milk and dry fruits for rejuvenating physical strength. Herbal remedies and massage are given to both mother and newborn child by designated women who have learnt and adopted the practices from their family lineage.

Breast milk is considered the purest form of nutrition for a child; therefore, a child is kept on breast milk for five to six months. Suppose, if required, the breast milk is supplemented with cow or goat milk.

During this period, mothers must follow a new lifestyle regime, again guided by experienced females or mid-wives, which vary across regions. A few limits are that a new mother cannot brush their teeth, eat spicy food, watch Television, and move freely in the house. She must cover her head and ears to prevent the common cold and other infections. In an Ideal situation, the family ensures not to involve the new mother in daily household chores and tiring work.

In India, mother-and-child co-sleeping is a well-accepted practice. Both parents and children share the same bed once the infant's routine is fixed. Commonly, co-sleeping extends until the beginning of adolescence.

The family priest is involved in making the child's horoscope and helps decide the child's name and customized prayers for their well-being performed by the family.



Picture 4 : Birth Ritual

The **“Namakaran”** is the formal naming ceremony when the first letter of the name is announced. Parents can name their child after this ritual.
Similarly, in Muslim Families, the father or respected elder whispers the **Adhan** into the baby's right ear and the child is named on the seventh day, known as **“Aqiqah.”**
Sikh families name the child on the eighth day after performing **“Ardas”** and distributing **“Kada-prasad”.** The **Guru Granth Sahib** is then opened randomly, and the first letter from the top of the left page is used as the first letter of the child's name.
The Christian family’s **“Baptism”** ceremony is performed to purify the child within eight days, and the child is named.
In other regions, the new Father's sister can name the child with an important ceremony in some places (Gatrad, Jhutti-Johal, Gill, et al., 2005; Gatrad, Ray & Sheikh, 2004; Gatrad, Sheikh, 2001).
There are a few other ceremonies, such as Ear Piercing, **Munja**, **Mundan** (Head Shaving), **Dastar Bandi**, **Annaprasan**, and **Khatna** (religious circumcision), which are performed along with the main ceremonies depending on the religious and cultural beliefs.

What are the expectations of Indian parents?

“Obedience” is the core of expectations. Mostly, all parents wish to entrust respect for elders and religious and family values to their children. It is a tedious task for the parents as they have to be in charge of their children, from feeding them to ensuring they excel in their studies and make a successful career.
It is a general scene in India that till the age of five or six, the child is fed by parents or elders in the home. There are no clear boundaries regarding bathing and changing clothes until the child turns adolescent. Indian parents give over emphasis to their children’s education.

Classic parenting techniques

Mothers are expected to cook fresh for the children and entertain all choices and eating habits of the child. Mothers or grandmothers commonly undertake child feeding, bathing, getting the child ready, and changing diapers. Baby diapers are infamous in India except for the child's first year. Very soon, all mothers would resort back to cloth napkins.
In case they do not, they are frowned upon by older females in the family.
Men usually do not participate much in these activities. A father would take the child out in the garden to play, give a bike ride and help the mother as and when required.
According to traditional gender norms in India, women within the family are typically assigned the responsibility of managing the dietary needs, food preparation, and daily routines of children, with the level of responsibility often determined by age and seniority.
The traditional Indian system of Ayurveda, rooted in indigenous practices, is observed to varying degrees within households. The child is exposed to targeted dietary regimens and herbal supplements to enhance immune function and achieve optimal nutrient balance.
One commonly observed practice during seasonal transitions involves the consumption of milk combined with turmeric, honey, or jaggery, particularly among children. In the winter season, it is common practice to administer ginger and basil leaves, combined with a small quantity of cloves, to children to combat the common flu.
These remedies are frequently employed within households, with senior women assuming the role of advisors, providing guidance on appropriate timing, dosage, and preparations (Joshi & Bhardwaj, 2017).
Indian parents are quite ambitious in educating their children. They want the best school and the best food for their children, for which they really work hard. Most parents nowadays send their children to preschool by the age of two and a half years; they prefer extra tuition to enhance learning. Apart from studies, the child is also sent for other hobby classes such as dance, music, karate, painting, swimming, or skating. The whole point is that parents wish that their child must not be left behind, and should be exposed to activities that they did not have the opportunity to experience.
Parents and relatives play an active role in matchmaking for their sons or daughters.

Marriages are fixed as per one's status, caste, class and region or state of mind. Every parent wishes their son or daughter's marriage to be a big event. Willingly or under social pressure, Indian marriages are exquisite events where both parties spend a huge sum, and all distant and near relatives are invited. It has regional and statewide differences, but marriages nowadays have become a multicultural melting point due to global exposure. In some cultures, the groom's mother is not allowed to witness the wedding ceremony as it is considered an ill omen. Girls’ parents do **“Kanyadaa”,** which means handing over their daughters to the boy’s family with the understanding that now they will take care of all her needs.

When “He” is “She”: the Child’s gender Matters

It is commonly believed that girls will one day become housewives while boys will become breadwinners. Except in a few states, Indian girls move in with their husbands. Girls are typically entrusted with more responsibilities within the home. At the same time, boys are typically tasked with carrying out activities that require interaction with society, such as trading, exchanging goods, and maintaining social ties.
When compared to girls, boys are regarded as more permanent members of the family because they are thought to be the ones who will carry on the family lineage. Female feticide is a dark secret in some Indian states, which is prevalent under cover despite strict laws against sex determination tests during pregnancy. A low female-to-male ratio is common across states except a few in India.
Many parents still desire the male child, considering the religious and cultural factors (Mitra, A. 2014; Sylvestre Gaudin, 2011). As per the common beliefs across religions and regions, with few exceptions, one cannot achieve salvation without the male child and is viewed as a greater return on the investment made by parents in all aspects (Zhang et al. 1999, Arnold et al. 1998; Dyson and Moore 1983).
The female child's importance is also documented in various religious scriptures across religions, but it is unimportant for us to give importance to this in practical life. We mostly remember that boys are **“Ghar Ka Chiraag”** (Boys are light of a Family)” than girls are **“Ghar Ki Lakshmi”** (Girls are family wealth) when we are expecting a child (Srinivas 1962). Also, the rise in reporting and exposure to crimes related to girls and women compels many parents and families to give the girl child a second choice or no choice (Fred, Minja, &, Roy, 1998). However, in the last two decades, there has been a significant positive change in girls' education, social status, and workforce involvement in India.

In many sectors, girls are excelling and outshining boys. This change is also disproportional to the female children from scheduled castes, poor financial status, rural, tribal, minorities and some religious communities. In an average household, parenting choices and parent's attitudes differ when it is a "Boy" and when it is a "Girl".

Old Age Planning and Security

Generally, parents casually view girls' careers because they would finally get married.

However, nowadays, many parents seriously consider girl education. But it is very important for a son to have a good career.

In India, many parents expect their sons to be with them in their old age. Though the scenario is changing, and many old parents are left behind by their sons, this expectation is present, which is not when it is a girl child. Living with a married girl child would be the last thing Indian parents would choose.

About 77% of Indian parents expect to live with their sons when they grow old. As per the India Human Development Survey (IHDS), only 7% consider living with their daughters in the last phase of their lives (Yoshihiko & Mostafa, 2017 & Hindustan Times, 2016).



Picture 5: Naming Ceremony

What is the situation of child's mental health in Indian families?

A Secure Nurturing Envelope

Children's mental health in India is not given much importance. More focus is on providing them with the right food, school, and value. Though we may be in a nuclear family, our collective culture places family well-being above the child's unique mental health needs. That also provides a good informal support system to the child. Parents and children have a safety net to overcome any crisis with the help of close community connections. The availability of grandparents, family members, and community is a great relief for the child and parents to get word of wisdom, love, and affection. We Indians, generally, do not depend on institutionalisation in situations of destitution and old age.

Parents as Fate Makers

Our main ideology is that parents will always do their best for their children, and they have all rights over them. They are given a position above God. The mother is viewed as someone who sacrifices all her needs for her children, and the father is someone who works hard to fulfil all the financial and security needs for them.
Many parents are incapable of raising children in a conducive environment. Childhood neglect and abuse are common scenes in their home. Indian legal system does not intervene in day-to-day parent-child business until anyone reports any severe physical or sexual abuse case. Though the situation has changed a lot, child reprimanding, punishing or spanking (physically abusive behaviour) in some families is still a culturally accepted norm.
However, India has a fair child protection policy. Key child protection legislation in India consists of four main laws: The Juvenile Justice (Care and Protection) Act (2000, amended in 2015); The Prohibition of Child Marriage Act (2006); The Protection of Children from Sexual Offences Act (2012), and The Child Labour (Prohibition and Regulation) Act (1986, amended in 2016) (UNICEF).

A culture of competition and pressure

The spirit to excel in school and college and get the best job exposes a child from a very early age to the unhealthy, competitive world. Generally, parents want to make their dreams come true through their children by negating their child's interests and abilities. Parents put their children into intense competition to get admission to prestigious universities and secure high-paying jobs. This pressure can overwhelm children, leading to anxiety and depression.

Mental health awareness among families

There is an overall lack of awareness among parents about childhood mental health. Children are naturally gendered; boys are discouraged from crying and expressing emotions. Since the beginning, they have been viewed as an asset for future life security. It puts the male child under constant pressure that they are good for nothing if they have no career. Whereas girls are stopped from expressing the emotions of aggression and assertiveness, it is viewed as a hindrance in future adjustment. From the beginning, they are systematically exposed to sacrifices and adjustments. Children cannot access mental health services on their own. As per the Indian legal system, parents' consent is essential. Usually, a child needing mental health support resorts to isolation, withdrawal, or conduct-related issues and grows as an adult with undiagnosed conditions. Labelling and comparison are common in families, discouraging children and parents from seeking professional support. Mental health services are mostly availed only in severe cases when a child or parent becomes dysfunctional.

National Crime Reporting Bureau data reveals that 11,396 children (5,392 boys and 6,004 girls) died by suicide in 2020. In 2023, post-class eleven and twelve results, nine students ended their lives. Each day, 35 students die by suicide in India. In the year 2023 till date, four students at different IITs (Indian Institute of Technology) have died by suicide (Adikari, 2023).

As per WHO, depression is the second leading cause of death in 15-29-year-olds in India. Depression rates are increasing among young people in India, with prevalence rates ranging from 31% to 57%. UNICEF also reports that one out of seven young people between the ages of 15 to 24 in India always feels depressed or has little interest in usual youth's activities.

Safeguarding collective parenting

India is a fairly safe country regarding child protection and a conducive environment for children (UNICEF). Our emotions and social bonding are our strengths. Given the current scenario, we are moving towards the right mix of our collective ways of parenting with Parenting freedom. A generation of new Indian parents is mitigating gender inequality and caste propagation. They are trying to be more responsive towards their children's holistic well-being and preserving family ties. We hope that in the near future, we will be a country with a strong multicultural positive parenting model.

That could be useful to revive the fading family system across the globe, which is the fundamental base of our Indian Parenting system.



Picture 6: Child Performing Religious Rituals

Case examples

--- SMALL STORIES FROM INDIAN HOUSEHOLDS

The three months

Ritu has been waiting for this pregnancy for the past several years; she has been feeling that she will get a better social status if she has a child, preferably a son, but because it is five years that she has been waiting for conception. Even having a daughter will be welcomed. When the day came, she told her mother about her pregnancy. It was a pensive mood at home. Her mother-in-law hugged her and asked her not to tell until she completed three months.

Crying and evil eye

It's midnight, and Veer is crying bitterly. He is difficult to console; his grandmother brings heated Asfodite (Hing) with Oil and applies it to Veer's naval. After some time, Veer stopped crying and slept. The next morning, she ties a "black thread" on Veer's little hand and asks Veer's mother to not leave him without applying **"Kohl"** (Kajal) on his cheeks and forehead. She says that someone has put their **"Buri Nazar"** (evil eye) on Veer, so he cried the whole night. The black thread with white and black beads and Kajal will save him from evil eye.



Picture 7: Hair Removal Ceremony of Girl Child (Mundan Sanskar)

Samskaras

Samardeep is calling her mother Amardeep by her name. His father is angry at him and tells him to apologize to "Mamma". Elders are not to be called by name. Every morning when Samardeep gets up, he is taught to touch his grandparents' feet. Touching feet is a way to respect elders and get their blessings.

---- PARENTS' DIARIES

Choosing the best schools

Sita is worried because her son will be 3 years old soon. In her quest to locate the most suitable educational environment for the child, Sita intends to visit each and every available school. She wants to carefully consider every possibility concerning the school's location, the costs associated with attending the school, the conduct of the teachers, and the curriculum. She is the one who will be responsible for transporting the child to and from the school each day.

Gender of the child: "Ladoo or Barfi"

Sushila is currently anticipating the arrival of her second child. The first child she gave birth to is a girl. This time, she strongly desires a boy to achieve a sense of wholeness within her family unit. The individual's extended family members are offering prayers at different locations to seek the birth of a male child. The individual believes that the fulfilment of their life's trajectory hinges upon the opportunity to witness the countenance of a male descendant who will perpetuate the familial lineage. It is customary for individuals to request the participation of young girls in offering prayers for their male siblings. hinges upon the opportunity to witness the countenance of a male descendant who will perpetuate the familial lineage. It is customary for individuals to request the participation of young girls in offering prayers for their male siblings.

Career of motherhood

Naeema gave birth to happy and healthy baby Sadiya. She was employed as the branch head of an international bank, and during her time there, she frequently travelled to other cities on short business trips. She is entitled to a six-month maternity leave because she recently gave birth. According to her mother, these things are assisting her in breastfeeding her child, which is necessary for the first six months. After six months, she cannot plan her routine of caring for her daughter. Because her family has a long-standing custom, she has been recommended to give up her job and take a break until Sadiya turns five. She still has trouble deciding whether it would be best to give up her job or hire a caretaker for Sadiya.

Tips

1

India is rich of many cultures which have different traditions, the best way to go is to avoid generalizations and try to recognize the symbols in people's speeches

2

In Indian households several generations of a family often live together, they all are actors in children's lives. They should all be taken into consideration to understand the family dynamic.

3

Indian society has evolved globally maintaining cultural traditions in a contemporary way of life. Psychologists should read both registries in parent's speeches the casual and the cultural.

References and additional information

Adikari, A. (2023). *India's shocking suicide rate: More than 35 students end life every day*, WIONEWS

Breton, (2020). *Why Indians continue to live in joint families*, Article, BBC News https://www.bbc.com/news/world-asia-india-54053091

Billig, M. S. (1992). The marriage squeeze and the rise of groom that is why he was crying whole night, price in India's Kerala state. *Journal of Comparative Family Studies*, 232, 197–216.

Buddhapriya, S. (2009). *Work-Family Challenges and Their Impact on Career Decisions: A Study of Indian Women Professionals*. Vikalpa, 34(1), 31–46. https://doi.org/10.1177/0256090920090103

Chadda RK, Deb KS. (2013). Indian family systems, collectivistic society and psychotherapy. *Indian J Psychiatry*. 2013 Jan;55(Suppl 2): S299-309. doi: 10.4103/0019-5545.105555. PMID: 23858272; PMCID: PMC3705700.

D'Cruz, P. and Bharat, Shalini. (2001). Beyond Joint and Nuclear: *The Indian Family Revisited Journal of Comparative Family Studies* Spring 2001, Vol. 32, No. 2, pp. 167-194

Deshpande, J. (2016). The effect of selected aspect of Garbha Sanskar on stress, coping strategies and wellbeing of antenatal mothers. *Int J Sci Res*, 5(3), 588-591.

Dyson, T., & Moore, M. (1983). On kinship structure, female autonomy and demographic behavior in India. *Population and Development Review*, 91, 35–60. 10.2307/1972894

Fred Arnold, Minja Kim Choe & T.K. Roy (1998) Son Preference, the Family-building Process and Child Mortality in India, *Population Studies*, 52:3, 301-315, DOI: 10.1080/0032472031000150486

Gatrad R, Jhutti-Johal J, Gill PS, et al. (2005). Sikh birth customs *Archives of Disease in Childhood* 2005;90:560-563.

Gatrad AR, Ray M, Sheikh. (2004). A Hindu birth customs *Archives of Disease in Childhood* 2004;89:1094-1097.

Gatrad AR, Sheikh A. (2001). Muslim birth customs Archives of Disease in Childhood - Fetal and Neonatal Edition 2001;84: F6-F8.

GOPALAN, S. (1996). The State and the Child: Who is Responsible? *India International Centre Quarterly,* 23(3/4), 156–176. http://www.jstor.org/stable/23004617

Gupta, N., Jain, V., & Pathak, A. K. (2022). Review on Garbha Sanskar and its Role in Mental Development of Children. *Himalayan Journal of Health Sciences*, 1-3.

Hajare, P., & Dave, H. (2019). Garbha Sanskar-Need of Every Expectant Mother For Healthy Progeny. Article in *International Journal of Scientific Research*.

Hindustan Times. (2016). *Indian parents want to live with sons in old age, find them dependable*, Article

James Georgas. (2004). in *Encyclopedia of Applied Psychology*, 2004

Joshi, K., & Bhardwaj, N. (2017). Traditional health care practices: a women centric study in lesser Himalayan region of Uttarakhand (India). *Journal of Pharmacognosy and Phytochemistry*, 6(3), 617-623.

Government of India. (2023, March 8). Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA). Retrieved September 1, 2023, from https://pmsma.mohfw.gov.in/about-scheme/

Gujarathi, J., & Gujarathi, R.(2019). MAINTAINING WOMEN HEALTH THROU. *International Ayurvedic Medical Journal* (7) 11, 2076-2080.

Keller, H., & Otto, H. (2009). The cultural socialization of emotion regulation during infancy. *Journal of Cross-Cultural Psychology*, 40(6), 996–1011. doi:10.1177/0022022109348576

Khan, A. S., & Shahid, Mohd. (2022). Maternal and Newborn Care Practices among the Muslim Slum Dwellers in India: Does the Popular Common Sense Matter? *The International Journal of Community and Social Development*, 4(4), 426–441. https://doi.org/10.1177/25166026221128182

Kishore, M. S. S., Kumar, P., & Aggarwal, A. K. (2009). Breastfeeding knowledge and practices amongst mothers in a rural population of North India: a community-based study. *Journal of tropical pediatrics,* 55(3), 183-188.

Ministry of Health and Family Welfare. (2023, September 1). Pradhan Mantri Surakshit Matritva Abhiyan. Retrieved from https://pmsma.mohfw.gov.in/

Ministry of Health and Family Welfare. (2022, July 22). *Initiatives for pregnant women.* Retrieved September 1, 2023, from https://pib.gov.in/PressReleaseIframePage.aspx?PRID=184384

Mitra, A. (2014) Son Preference in India: Implications for Gender Development,

Mohyuddin, A., & Awan, H. M. (2015). Protection from the evil eye-through Nazar Butto: A symbolic analysis in anthropological perspective. IAHRW *International Journal of Social Science*, 3(4), 484-488.

Journal of Economic Issues, 48:4, 1021-1037, DOI: 10.2753/JEI0021-3624480408

Mullatti L. (1995). Families in India: Beliefs and realities. *J Comp Fam Stud*. 1995;26:11–25.

Nimbalkar, A. S., Shukla, V. V., Phatak, A. G., & Nimbalkar, S. M. (2013). Newborn care practices and health seeking behavior in urban slums and villages of Anand, Gujarat. *Indian Pediatrics*, 50(4), 408–410. doi:10.1007/s13312-013-0116-y

Nijhara K, Bhatia S, Unnikrishnan B. Corporal punishment in children and its implications on mental health. *Indian J Pediatr* 2018;85:405. 10.1007/s12098-017-2525-8

Patel, V., & Trivedi, C. (2023). *Religious Beliefs During Pregnancy Among Women Living In Urban And Rural Areas Of Ahmedabad District. In Moving Towards Self-Reliant India (Atmanirbhar Bharat) Through Indigenous Skills,* 5. RED'SHINE PUBLICATION PVT. LTD.

Petitet, P. H., & Pragathi, V. (2007). Ethnographie Views on the" vaḷaikāppu": A pregnancy rite in Tamil Nadu. *Indian Anthropologist*, 117-145.

Seema, K. N., & Begum, K. (2008). Childrearing practices among Kurubas and Soliga tribes from South India. *Studies of Tribes and Tribals*, 6(1), 59–62. doi:10.1080/0972639X.2008.11886576

Sriram, R., & Navalkar, P. (2013). *Fathering in India: Understanding challenges and opportunities. Father Involvement in Young Children's Lives: A Global Analysis*, 279-300.

Sylvestre Gaudin. (2011). *Son Preference in Indian Families: Absolute Versus Relative Wealth Effects*. Demography 1 February 2011; 48 (1): 343–370. doi: https://doi.org/10.1007/s13524-010-0006-z

Srinivas, M. N. (1962). *Caste in India and other essays*. Bombay, India: Asia Publishing House.

Tuli, M. (2012). Beliefs on parenting and childhood in India. *Journal of Comparative Family Studies*, 43(1), 81-91.

UNICEF, Protecting India's children from violence, abuse and exploitation,

Websites:

https://www.unicef.org/india/what-we-do/child-protection
https://www.who.int/india/health-topics/depression
https://www.wionews.com/india-news/indias-shocking-suicide-rates-more-than-35-die-students-every-day-591830
Yoshihiko Kadoya & Mostafa Saidur Rahim Khan (2017) Can concern for the long-term care of older parents explain son preference at birth in India?, *Journal of Women & Aging*, 29:3, 254-266, DOI: 10.1080/08952841.2015.1138048
Zhang, J., Zhang, J., & Li, T. (1999). Gender bias and economic development in an endogenous growth model. *Journal of Development Economics*, 59, 497–525. 10.1016/S0304-3878(99)00022-X