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When women eat last:

Discrimination at home and women's mental health

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Thanks!

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Motivation

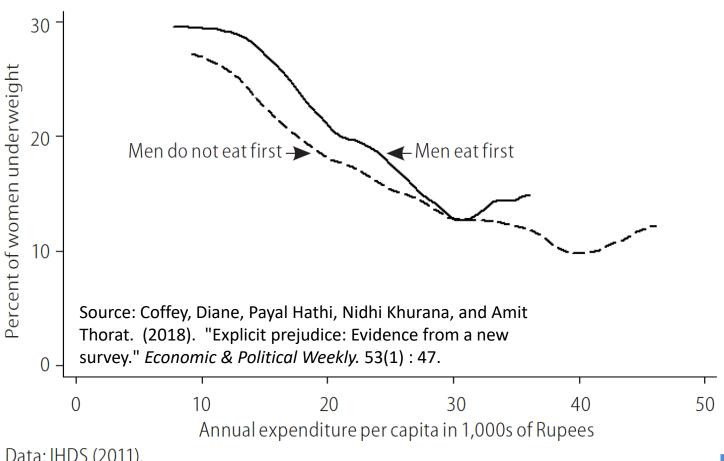
- Discrimination against women takes many forms, hurting women, their children, and their communities
- Food distribution within the household is an important aspect of this discrimination
- In 2012, 25% of households reported that women eat meals after men have eaten







Practice of women eating last affects their physical health: women in households where they eat last are more likely to be underweight



Data: IHDS (2011).







Research Questions

 Are there differences in mental health between women living in households in which they eat last, compared to women in households in which they eat together with men?

 What is the pathway through which eating last is associated with mental health?







Data: Social Attitudes Research, India (SARI)

- SARI is a mobile phone survey that builds representative samples of adults aged 18-65 using probability weighted random digit dialing and within household respondent selection.
- Survey weights based on the 2011 Census adjust for respondent sex, age, urban/rural residence, and education.
- Sample: ever-married women, aged 25 and above







SARI sample sizes and response rates

	Overall survey		Mental health questions		
	Sample size	Response rate	Sample size	Response rate	
Bihar	3438	100/	1619	93%	
Jharkhand	1009	19%	500	89%	
Maharashtra	1666	25%	784	95%	







Outcome: women's mental health, as measured by an adapted Self-Reporting Questionnaire (SRQ)

I will ask you about the sadness or problems you faced in the last 30 days...

- Is your appetite poor?
- Do you have trouble sleeping?
- 3. Do you have trouble thinking clearly?
- 4. Do you find it difficult to make decisions?
- 5. Do you feel tired all the time?
- 6. Has the thought of ending your life been on your mind?







Predictor: Whether women eat last

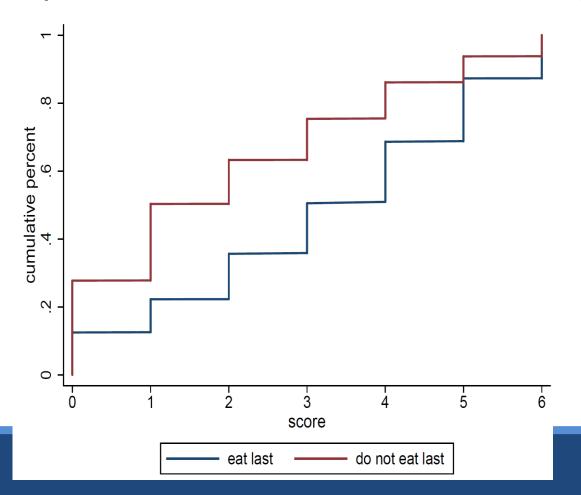
When your family eats lunch or dinner, do the women usually eat with the men? Or do the women usually eat first? Or do the men usually eat first?







Women who eat last have worse mental health compared to those who do not (SARI)



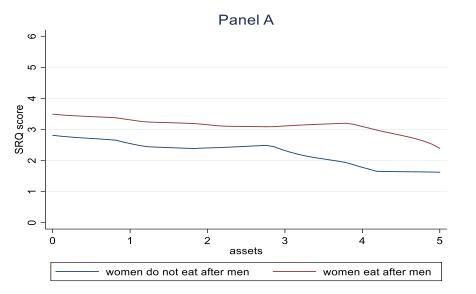




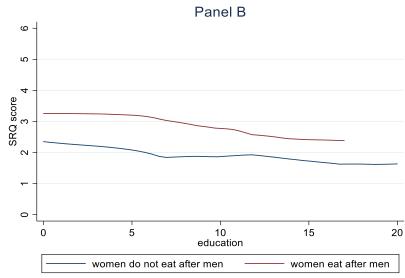


This holds for all levels of asset wealth and all levels of education

by asset wealth



by education

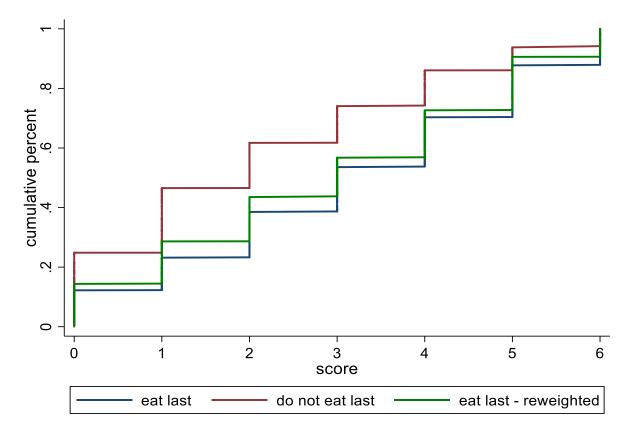








Differences in mental health remain even if both groups have same distribution of asset wealth and education (SARI)









Even adding in more controls, women who eat last have a greater proportional odds of reporting worse mental health (SARI)

	SRQ total score							
	<u>urban & rural</u>							
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	
Women eat last	2.561***	2.567***	2.289***	2.285***	2.128***	2.190***	1.880*	
	(0.464)	(0.472)	(0.454)	(0.452)	(0.441)	(0.494)	(0.461)	
Age		x	x	x	x	x	Х	
Education			X	X	X	X	X	
Muslim				X	X	X	X	
Number of assets					X	X	X	
Caste group						Χ	Х	
State							X	
n	1144	1144	1144	1143	1139	1111	1111	

Note: Standard errors in parentheses. + p<0.1 * p<0.05 ** p<0.01 *** p<0.001.







Is eating last associated with poor mental health because it causes poor physical health (which is bad for mental health), or because it indicates a lack of autonomy (which is bad for mental health)?







Ideal Strategy

Regress mental health on eating last, controlling for autonomy.

If the coefficient on eating last is reduced to zero, autonomy is likely the pathway through which these variables are related.







A candidate indicator of autonomy

SARI asked women:

"When you want to go outside alone somewhere near your home, such as to visit a neighbor, do you need to ask your husband or family, or do you just tell them and go?"







Women's autonomy (asking for permission) does not mediate the relationship between mental health and eating last (SARI)

	SRQ total score			
	<u>urban & rural</u>			
	(1)	(2)	(3)	(4)
Women eat last	2.561***	2.578***	1.880*	1.891**
	(0.464)	(0.472)	(0.461)	(0.464)
Ask for permission to go to neighbor's house		0.944		0.955
		(0.182)		(0.190)
Age			Х	Х
Education			Х	X
Muslim			Х	X
Number of assets			Х	X
Caste group			Х	Х
State			X	Х
n	1144	1144	1111	1111

Note: Standard errors in parentheses. + p<0.1 * p<0.05 ** p<0.01 *** p<0.001.







Would a different measure of autonomy yield different results?







Data: India Human Development Survey (IHDS)

- IHDS: A nationally representative panel dataset from 2005 and 2012 that collected extensive information on women's status in over 41,000 households.
- We use IHDS 2012 data on women's decision making power
- Sample: ever-married women, aged 25 and above







A measure of autonomy in the IHDS

"Please tell me who in your family has the most say in the decision of:

- What to cook on a daily basis
- Whether to buy an expensive item such as a TV or fridge
- How many children you have
- What to do if you fall sick
- Whether to buy land or property
- How much money to spend on a social function such as a marriage
- (if respondent has children) What to do if a child falls sick
- To whom your children should marry"







Women with greater autonomy (greater decision-making power) are less likely to eat last in their households (IHDS)

	-	
	Women eat last	
	(1)	(2)
Decision-making power (reference category: 0 decisions)		
1-2 decisions	-0.205***	-0.0697***
	(0.0179)	(0.0171)
3-4 decisions	-0.217***	-0.140***
	(0.0240)	(0.0220)
5-6 decisions	-0.316***	-0.161***
	(0.0387)	(0.0359)
7-8 decisions	-0.389***	-0.257***
	(0.0336)	(0.0313)
Age		X
Education		x
Muslim		X
Number of assets		X
Caste group		X
State		X

n 3772 3772







Conclusions

- For women, the practice of women eating after men is correlated with worse mental health.
- While autonomy may mediate the relationship between gender discrimination and mental health, some measures of autonomy may be better able to capture this.
- New data, combining all four variables of interest, are needed to better understand these relationships.