

Decreasing Sex Ratio and Pregnant Women's Attitude Towards Female Foeticide

Kamla Sarna

A descriptive study to assess the knowledge about decreasing sex ratio and attitude towards female foeticide of pregnant women attending antenatal OPD in a selected hospital in Ludhiana, Punjab.

The Constitution of India guarantees equality to women. It empowers the states to adopt measures for affirmative discrimination in favor of women and also impose a fundamental duty on its citizens to uphold the dignity of women but despite all this, India's deep rooted "sons only" ethos continues and girls and women face inequity and inequality everywhere. They are devalued as human beings from the day they are born. But what is worse is that they are even denied the right to be born, if their families do not wish them to be born.

New developments in medical technology have helped to improve health care for millions of people. One cheap and widely available test can determine the sex of the child. There is gross misuse of reproductive technology in a society characterized by a strong bias against a female child. The census report of 2001 presents a grim reality indicating an imbalance in the ratio of female and male. It is a common fact that the sex ratio in India is lower than international standards i.e. sex ratio in India is 933 while the world average is 986 (Dutta, 2001).

Number of causes are responsible for the continuous decline in the sex ratio e.g. poverty, illiteracy, culture and preference for male child

etc. The discrepancy in the sex ratio in the lowest age group is found in most prosperous areas of India-Punjab, Madhya Pradesh, Rajasthan, Delhi, Gujarat, Haryana and Chandigarh. All these states have sex ratio of less than 900 females to 1000 males below the age of six.

The declining sex ratio could result in a demographic and social disaster. In such a situation it is the primary duty of the health professionals to provide proper information to the general public about the declining sex ratio and its affects in India. The present study was undertaken in order to determine to what extent the pregnant women are oriented to the actual problem of declining sex ratio and also to ascertain their attitude towards female foeticide.

Objectives of the Study

1. To assess the knowledge of pregnant women about decreasing sex ratio.
2. To assess the attitude of pregnant women towards female foeticide.
3. To find out the relationship of attitude of pregnant women towards female foeticide with variables i.e. age, education, religion, occupation, married for years, family income, type of family, residence and source of information etc.

Materials and Methods

A descriptive study approach was used to conduct the study, which was conducted in Antenatal OPD of Christian Medical College and Hospital, Ludhiana. Purposive random sampling technique was used for selection of sample. The population consisted of 50 pregnant women attending OPD. The time period of study was from 1.6.2002 to 15.7.2002. The technique and methods used were structured questionnaire was developed based on review of literature. It consisted of three parts.

The first part consisted of items for obtaining personal information about age, education, religion, occupation, married for years, family income, and type of family and source of information. The second part consisted of statements to find our knowledge of clients about sex ratio, decreasing ratio, causes of declining sex ratio and affects and problems related to female foeticide. The statements were developed for the respondents to respond on 'Yes' or 'No' or 'Do not know' basis. Each correct response was given one score and wrong response was not given any score. Hence maximum score was 20 for twenty statements and minimum score was zero.

Assessing the attitude is an important aspect because attitude may differ from individual to individual; attitude is concerned with the beliefs, interests, ideas of person and also to the behavior of the

The author is Reader / Supervisor, College of Nursing, CMC, Ludhiana.

person. The third part deals with the statements regarding assessment of attitude of pregnant women towards female foeticide. The statements were developed for the respondents to respond on five point Likert scale i.e. strongly agree, agree, undecided, disagree and strongly disagree. There were total 20 statements, which include 10 negative and 10 positive statements. For positive statements, the responses qualified by giving score as SA - 5, agree -4, U-3, DA - 2, SDA- 1. Negative statements scored reversely. Hence maximum score was 100 and minimum score 20.

Findings and Discussions

Sample Characteristics: Majority of the clients were in the age group of 21-30 years (72%) followed by 24% in the age group of 31-40 years and only 4% above 40 years. 48% of them were the academic qualification of plus two and above, 30% were illiterate and 22% had passed 10th class. Most of women were Hindus (48%), followed by Sikhs 32%, Christians 14% and Muslims only 6%. Majority of women (76%), were housewives and 24% were professionals. Maximum number of women (66%) were married for 1-9 years, 30% of women married for 10-19 years and 4% married for more than 20 years. 54% of them were having family income 5001-10000, 36% had income less than 5000 and only 10% were with income more than 10,000. Most of women (72%) resided in urban area and 28% belonged to rural areas. For 62% source of information was mass media (TV, newspapers and radio etc.) and 38% got information from relatives.

Analysis shows that the

knowledge level of many women were found to be average about causes of female foeticide but inadequate about affects of decreasing sex ratio and lowest about meaning of sex ratio and decreasing sex ratio.

Mean attitude score of pregnant women towards female foeticide was 3.5.

Pregnant women between the age group of 21-30 years obtained highest mean attitude score (84.42). Women with qualification plus two and above scored higher (89.2) as compared to other groups. Hindus scored higher (94.6) as compared to other religions. Mean attitude score was higher (89.0) in housewives. Women married for 1-9 years scored higher (84.8). Women with family income more than 10,000 had highest mean attitude score (87.4). Pregnant women from urban areas had high mean attitude score (84.6%) as compared to women living in rural areas. Women who watched TV scored higher (92.6) as compared to other sources of information.

Conclusion

The study shows that the knowledge level of pregnant women is inadequate about the decreasing sex ratio and its affects. Steps should be taken to educate women to make them aware about the same. Planned health education programmes by health professionals should be made on an ongoing process in Antenatal OPD, General OPD, Paediatric OPD/ Wards and the community setting. Nurses can play an important role to provide health education to public.

Recommendations

- 1) A similar study should be taken up on larger sample to

draw generalizations.

- 2) Comparative study can be done on rural and urban population.
- 3) Similar studies should be conducted about working and non-working women.

References

1. Dutta, Subhabrata (2001) Child sex ratio - The Grim picture. Social welfare Vol 48, No. 8 PP 17-18.
2. Jain, Sharda (1999) Female Foeticide continues unabated. Save before they perish. Journal of Obstetric and Gynecology. Vol IV No. 12 PP 707-709.
3. Kaura, Girjashankar (2001) Female Foeticide on rise. The Tribune June 23rd.
4. Nair, G. Ravindaran (1991) eternal injustice against half the World. Social welfare Vol 37, N 11-12 P-2.
5. Polit, D.F. and Hungler, B.P. (1983). Essential of Nursing Research Philadelphia. J. Blippincott Co.
6. Rao, Radhakrishna (2001) Stop Foeticide. Social welfare Vol. 48, No. 8, PP-27.
7. Sabu, George (2000) Female Foeticide in India. Health Action. Vol 13, No. 9 PP - 23-26.
8. Singh, Sunita (2000) KAP study on HIV/Aids among nursing graduates. The Nursing Journal of India. Vol. 42 No. 12 PP 275-1147.
9. Van Wissen, K and Woodman, K (1994). Nurse's attitude and concerns to HIV/ Aids. Journal of Advanced nursing 20 pp 1141-1147.
10. Vedanti (2001) Female Foeticide greatest sin. Hindustan Times 6th May 2001.