

FEMALE FOETICIDE: AWARENESS AND PERCEPTIONS OF MARRIED WOMEN IN THE REPRODUCTIVE AGE GROUP IN JAMNAGAR DISTRICT

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ABSTRACT

Background: Female foeticide is a practice that involves the detection of the sex of the unborn baby in the womb of the mother and the decision to abort it if the sex of the child is detected as a girl. Such foetus is considered to be “suffering from the very disease of being a female foetus”. If the female foetus is lucky enough to survive till her birth, then she faced the peril of elimination in infancy by female infanticide. This could be done at the behest of the mother, or father, or both are under family pressure.

Aims & Objective: This study aimed to assess awareness and to know about perceptions regarding female foeticide among married women in the reproductive age.

Materials and Methods: 500 married women of reproductive age group residing in urban and rural areas of Jamnagar district were interviewed with their informed consent using a predesigned questionnaire to elicit information about their knowledge and perceptions regarding female foeticide.

Results: Out of 500 study participants, 32% responded that they have heard of female foeticide from their friends. 71.2% women who had given their view that female foeticide is considered as a crime, but only 229 (45.8%) women had knowledge about legal punishment / penalties for female foeticide. The majority of women (96.8%) had given their view regarding female foeticide that it should be stopped.

Conclusion: The effort towards the awareness and sensitization campaigns for the girl child, as is being carried out by the central and state governments should be stepped up and extended.

Key Words: Female Foeticide; Sex Determination; Sex Ratio; Awareness; Perceptions; Married Women; Reproductive Age

Introduction

Sex selective abortion is a fairly recent phenomena but its root can be traced back to the age old practice of female infanticide. Kollor (1990) defines infanticide as, “Killing of an entirely dependent child under “one year of age” who is killed by mother, parents or others in whose care the child is entrusted”.^[1] The scope of the problem of infanticide became clear in 1871, in the setting of India’s first census survey. At that time it was noted that there was a significantly abnormal sex ratio of 940 women to 1000 men. This inhuman practice continues even today.^[2] The latest advances in modern medical sciences - the tests like amniocentesis, chronic villus sampling and ultrasonography, which were originally designed for the detection of gender related congenital abnormality of the foetus are now being abused particularly in India and Asian countries primarily to detect the sex of the foetus. Additional threat that causes grave concern is the development of new pre-selection techniques, such as, Electrophoresis, Ericsson’s method, etc., which involve prior manipulation of the sex of the child.^[3] One of the most disturbing features of demography is adverse sex ratio which is revealed in census 2011. The overall sex ratio has been showing a secular decline; from 972 in 1901 to 933 in the year

2001.^[4] The sex ratio at the national level has increased by 7 points since 2001 to reach 940 in census 2011. But it is worrisome to note that the sex ratio has declined in Gujarat, Jammu and Kashmir and Bihar.^[5] Most alarming is a decrease in child sex ratio (CSR: 0-6 age group) which was 976 in 1961 and fell down to 927 in 2001. As per the census of 2011, the child sex ratio of India has gone down from 927 to 914 females per 1000 males, a significant decline in 13 points, which is the lowest since the country’s independence. In Gujarat, there has been a marginal improvement by 3 points from 883 in 2001 to 886 in 2011 census. The proportion of couples in Gujarat who currently have 2 sons or 1 son and 1 daughter and do not want any more children varied between 90 – 95 percent while this proportion for couples with 2 daughters was only 49 percent.^[6] The present study seeks to explore the awareness and perceptions regarding female foeticide among married women of reproductive age in Jamnagar district.

Materials and Methods

A community based cross sectional study was conducted in selected urban and rural areas of Jamnagar district. The study period spread from October 2010 to October 2012. The sample size was calculated with the

assumption that 50 per cent of the reproductive women will have a preference for the male child and 50 per cent of the girl child. The sample size was calculated by using the formula $n = 4pq/L^2$. Allowable error (L) of 10 percent of the prevalence was taken. Considering the non-response rate of 20 % of the sample size, total sample size comes out to be 480 for the study. To make round figure, 500 study subjects were chosen. It was decided to take all married women (15-45 years) from each household. 30% (150) of the study population was taken from an urban area and 70% (350) was taken from rural areas, according to approximate urban-rural ratio of the population of the study district as per census 2011. Out of 10 talukas in the study district, one was selected for the study purpose randomly. One ward from total 19 wards of an urban area and out of 107 villages in study taluka, 7 villages were selected randomly. From each selected village 50 study subjects were selected randomly. For random selection, the random number table was used. Ethical clearance has been obtained from the Institutional Ethic Committee of M P Shah Government Medical College, Jamnagar. Informed oral consent was taken before the initiation of the survey and their identity were kept confidential. A predesigned and pre-tested proforma questionnaire was used to elicit information. The data were analyzed using the Microsoft Excel 2007. Test of proportions (Z test) was used to test the statistical significance.

Results

Table 1 shows that almost one third of women (32%) responded that they have heard of female foeticide from their friends. In case of 25%, 16% and 27% women television, newspaper and family were the sources of knowledge about that respectively. The newspaper was the source of information for 22% and 13.43% women in urban and rural areas respectively. For 19.33% and 27.43% women in urban and rural areas, television was the source of information respectively. Findings in table 2 shows that out of 364 respondents who were aware about consequences of female foeticide, almost half of them, i.e., 55.04% and 52.77% in urban and rural area respectively, responded that there would be difficulty in finding matches for boy, followed by 27.13% of urban women and 23.40% rural women opined that there will be an increase in sexual and social crimes against women, 25.58% urban women and 17.87% of rural women opined that females will be brought as brides.

Table 3 shows that majority of women (71.2%) women

who had given their view that female foeticide is considered as a crime; while 1.6% opined that it is not considered as a crime. 27.2% responded that they have no knowledge about that. More women in urban area (79.33%) were aware about the fact than women in rural areas (67.71%). It was statistically significant. ($Z = 2.81$)

Only 229 (45.8%) women had knowledge about legal punishment/ penalty for female foeticide, rest 54.2% responded that they have no knowledge about the punishment. More women from urban area (57.33%) were aware about the fact than rural areas (40.86%). Those who had knowledge about the punishment for female foeticide, 52 (17.39%) and 22 (7.36%) women responded that doctor and mother are punished for female foeticide respectively. 43.81% women responded that both are punished for that. Almost 1/3 of women responded that family members are punished. [Table 4]

Majority of women, i.e., 96.8% had given their view regarding female foeticide that it should be stopped, while 16 (3.2%) women were in favour of going for female foeticide [Table 5]. Findings in table 6 show that out of 500 women, almost one third (31%) opined that college students should be educated about female foeticide, while another one third were in favour of the opinion that both college and school going children should be given an education. 35 (7%) women felt that there is no need to educate college and school going children about that, while almost one third of women did not respond.

Table-1: Distribution of women according their source of knowledge about female foeticide

View	Distribution of women		
	Urban	Rural	Total
	No. (%)	No. (%)	No. (%)
Television	29 (19.33)	96 (27.43)	125 (25)
News paper	33 (22)	47 (13.43)	80 (16)
Family	43 (28.67)	92 (26.29)	135 (27)
Friends	45 (30)	115 (32.86)	160 (32)
Total	150 (100)	350 (100)	500 (100)

Table-2: Distribution of women according their views regarding consequences of female foeticide

View	Distribution of women	
	Urban (N=129)*	Rural (N=235)*
	No. (%)	No. (%)
Difficulty for finding matching for boy	71 (55.04)	124 (52.77)
Lead to 'All -male' family	17 (13.18)	40 (17.02)
Females are brought as brides	33 (25.58)	42 (17.87)
Chances of increase in sexual and social crimes against women	35 (27.13)	55 (23.40)
Chances of increase in prostitution and cases of STIs (HIV/AIDS)	18 (13.95)	20 (8.51)

* Multiple responses

Table-3: Distribution of women according their view regarding female foeticide if considered as crime

View	Distribution of women		
	Urban	Rural	Total
Yes	119 (79.33)	237 (67.71)	356 (71.2)
No	3 (2)	5 (1.43)	8 (1.6)
Do Not Know	28 (18.67)	108 (30.86)	136 (27.2)
Total	150 (100)	350 (100)	500 (100)

(Z = 2.81)

Table-4: Distribution of women according their knowledge regarding to whom punishment/penalty for female foeticide is given

Knowledge	Distribution of women		
	Urban	Rural	Total
	(N=86)	(N=143)	(N=229)
	No. (%)	No. (%)	No. (%)
Doctor	16 (14.29)	36 (19.25)	52 (17.39)
Mother	6 (5.36)	16 (8.56)	22 (7.36)
Doctor and Mother	56 (50)	75 (40.11)	131 (43.81)
Family members	34 (30.35)	60 (32.09)	94 (31.44)

Table-5: Distribution of women according their view regarding if female foeticide should be stopped

View	Distribution of women		
	Urban	Rural	Total
Yes	143 (95.33)	341 (97.43)	484 (96.8)
No	7 (4.67)	9 (2.57)	16 (3.2)
Total	150 (100)	350 (100)	500 (100)

Table-6: Distribution of women according their opinion to whom education about female foeticide should be given

View	Distribution of women		
	Urban	Rural	Total
	No. (%)	No. (%)	No. (%)
To only college students	62 (41.33)	93 (26.57)	155 (31)
Both college and school going children*	56 (37.33)	102 (29.14)	158 (31.6)
None	10 (6.67)	25 (7.14)	35 (7)
No response	22 (14.67)	130 (37.14)	152 (30.4)
Total	150 (100)	350 (100)	500 (100)

* School going children-higher secondary students

Discussion

Killing of women exists in various forms in all societies the world over. Unfortunately the killing of women is severe in China, India, Korea, Bangladesh and Pakistan. India has special and most inhuman and unethical killing methods-dowry deaths, rape leading to suicide or homicide, female foeticide and human sacrifices.^[7] The areas affected by the problem are found generally to be in South Asia, the middle East (Algeria, Jordan, Syria, Turkey) and parts of Africa (Egypt, Cameroon, Morocco, Libya, Liberia, Tunisia, Madagascar). In Latin America, there is evidence of abnormal sex ratios in mortality figures in Mexico, Peru and Uruguay. The problem is also rampant in the People's Republic of China, a country greatly proud for its effective population stabilization policy. It must also be noted that since two thirds of the world's population live in areas where registration of deaths does not occur and where the death rates are not

published by sex (census 2001), it is very difficult to find the problem. Sex selective abortions have become a significant social phenomenon in various parts of India. The girl children become target of attack even before they are born. It transcends all castes, class and communities and even the North South dichotomy.^[3] The prevalence of prenatal sex determination is more widespread among the economically well-off because availing of such services is determined by one's ability to pay. After the introduction of these tests, hoardings appeared in different parts of India, which said 'invest ₹ 500 now, save ₹ 50,000 later' and sometimes the saving amount was mentioned as ₹ 5,00,000. The advertisements are designed to encourage prospective parents to abort female fetuses in order to avoid future dowry expenses. Hence, the rich agriculturalists living in the rural areas of Punjab, Haryana and Gujarat and the urban elite living in the city of Delhi tend to avail of sex-selective abortion.^[8] Sex determination tests are widely resorted to even in the remotest rural areas. Since many deliveries in rural areas take place at home there is no record of the exact number of births/deaths that take place. Consequently, it is difficult to assess the magnitude of the problem.^[3]

In this study, almost one third of women responded that they have heard of female foeticide from their friends. Television, newspaper and family were the sources of knowledge in case of 25%, 16% and 27% women respectively. Siddharam noted that 90% of the respondents got the information about female foeticide from the mass media, followed by 8% and 6% from neighbours and friends respectively.^[9] Almost 3/4th of respondents, who were aware about consequences of female foeticide, almost half of them responded that there would be difficulty in finding matches for boy, followed by one fourth of women opined that there will be an increase in sexual and social crimes against women; one fifth of them opined that females will be brought as brides. R K Bansal noted that 28.6% women responded that marriage problem for male will rise, it will lead to social, economic and mental problems (28.3%), polyandry will start (4.1%), the number of rape cases other crime will increase (12.8%), the population will decrease (4.1%) and value of women will increase (3.4%).^[10] Studies by Ajinder Walia and Shalini had similar views. 71.2% women had given their view that female foeticide is considered as crime.^[11,12] More women in urban area were aware about the fact than women in rural areas. The difference was statistically significant

45.8% women had knowledge about legal punishment / penalties for female foeticide; out of that 17.39% and 7.36% women responded that doctor and mother are punished for female foeticide respectively. 43.81% women responded that both are punished for that. Almost 1/3 of women responded that family members are punished. In his study Khandelwal revealed that only 38 % of women were aware about the fact that the doctor is also punished for this crime and 62% women were not aware about the punishment given to doctor for fetal foeticide.^[13] Majority of women had given their view regarding female foeticide that it should be stopped, while very few women were in favour of going for female foeticide. However, in a study done by Walia among the adult population in three districts of Punjab having low child sex ratio though the awareness regarding female foeticide was found to be very high, yet the majority of the respondents approved of this heinous act.^[11]

Conclusion

This study reveals that almost all of the study participants strongly felt that this harmful practice should be stopped altogether. Efforts should be made to implement the laws effectively. Strict punishment needs to be given to the defaulters as per the PNDT Act. Legislative measures like Prohibition of Dowry Act should be strictly enforced. There is need to increase the awareness in the community about female foeticide, so that the people can identify it as a social problem and further try to curb female foeticide. As school children and college students are important stakeholders in elimination of the practice of female foeticide, so they should be equipped with knowledge so that they can act as change mediators in the society. The Gov. of India and the state governments have launched various schemes and campaigns to curb this problem, i.e. "Beti Bachao Abhiyan" in Gujarat. Free and compulsory education should be provided to female children so that

they can support themselves during exigency. Also, it would remove the attitude that 'investing in girls is unnecessary'. Women should be imparted skills and training through various vocational programmes.

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