

Gender Priority And Awareness Related To Fetal Sex Determination Among Antenatal Women: A Study

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Abstract

Gender preference is a well-known feature of society. There are significant differences in gender preferences between developed and developing countries. Indians show a strong sexual preference for male children. Preference for sons is associated with preferential abortion of female fetuses. According to last conducted census 2011 the child sex ratio in India has dropped to 914 females against 1,000 males. One of the most important preventable factors is preventing abortion in sexually selective women.

To study prenatal female sexual preferences and related factors and to assess awareness and perceptions of prenatal sex determination.

Interviews were done among 70 antenatal women attending tertiary health care hospital, Panipat using predesigned questionnaire. Gender empowerment, women education and stringent implementation of PCPNDT Act can curb the social issue of female foeticide.

Keywords: Antenatal women, Female foeticide, Gender Preference, Sex Determination, Panipat, Haryana.

Introduction

The sex ratio is calculated as number of males per 100 females in a population of worldwide, whereas in India it is defined as number of females per 1000 males. Over the past few decades India has seen a significant decline in the gender ratio and this is a serious problem that needs to be addressed. Various factors attributed to the lower sex ratio include the sexually selective abortions and female foeticide. One of the most important preventable factors among these is the

prevention of sexually selective female abortion (Kumar, 2014). With the advancement of this technology and its commercialization, this discrimination begins even before birth. To address this issue, the Government of India has introduced the Preconception and Prenatal Diagnostic Techniques Act (PCPNDT), 1994.

However, prenatal gender detection techniques are still abused and selective abortion of female offspring is widespread. With this in mind, this study was conducted with the following objectives:

1. To explore the gender preference and its associated factors among antenatal women.
2. Assessing their Consciousness (awareness) and Perceptions Related to Prenatal Sex Determination.

Materials and Method

The present study is a hospital based cross sectional study conducted among the antenatal mothers at OBG (Obstetrics and Gynecology) department of Government Hospital, Panipat, Haryana. Antenatal women, irrespective of parity and gestational age and those giving consent to participate were recruited during the study duration i.e., from Oct 2022-Dec 2022. Thus, a total of 70 antenatal women were taken for the study. A predesigned pre-tested questionnaire was used to elicit information on socio-demographic information, gender preferences and its reasons, knowledge regarding sex determination techniques and perceptions regarding gender discrimination.

Results

A total of 70 antenatal women attending the OBG department were interviewed after taking their consent. The majority of the participants (45.71percent) were in the age group of 23-27 years. Among them, 46 (65.72 percent) antenatal women were Hindu by religion and 24 (34.28percent) were Muslims. Majority of them belonged to joint family (54.29percent) and the rest (45.71percent) belonged to nuclear family. The socioeconomic status was determined and it was found that 34percent of the antenatal women belonged to lower class, 47percent

belonged to middle class and 19percent to the upper class [Table-1].

Table-1: Socio demographic profile of study participants	
Sociodemographic Profile	Frequency (percent)
AGE	
18-22	31.42
23-27	45.71
28-32	20.02
33-37	2.85
RELIGION	
Hindu	65.72
Muslim	34.28
TYPE OF FAMILY	
Joint	54.29
Nuclear	45.71
SOCIO ECONOMIC STATUS	
Lower class	34
Middle class	47
Upper class	19
Total	100

[Table-2] shows the current gender composition of children among study participants. Majority (40percent) of antenatal women included in the study had no children. 20percent had only one son, 2.85percent had two sons, 2.85percent had one son and one daughter, 22.45percent had only one daughter, 10.55percent had two daughters and 1.42percent had only three daughters.

Table-2: Current Gender Composition	
Current Gender Composition	Frequency(percent)
No children	40
1Son0Daughters	20
`1Son1Daughter	2.85
2Sons0Daughter	2.85
0Sons1Daughter	22.45
0Son2Daughters	10.55

0Son3Daughters	1.42
Total	100

Only 15.71 percent of the women were illiterate, 55.72 percent had completed their primary level of education and majority i.e., 28.57 percent had secondary level of education or above. Majority of the women 80percent were unemployed while the rest 20percent were employed [Table-3].

Table-3: Association of socio-demographic and obstetric profile with the preference of male child		
Socio demographic & Obstetric characteristics	Preference of male child	
	Yes(percent)	No (percent)
Educational status		
Illiterate	8(72.72)	3(27.27)
Primary	15(38.46)	24(61.54)
Secondary and above	4(20)	16(80)
Occupation		
Employed	5 (35.71)	9(64.29)
Unemployed	24(42.86)	32(57.14)

[Fig-1] shows that 39.45percent antenatal mothers had preference for male child in their current pregnancy, 27.52percent antenatal mothers had preference for female child and 33.03percent had no gender preference. The main reason for male preference cited by subjects were socio ritual factors (47.50percent) followed by to carry their family name (37.50percent), less expensive to raise the male child (12.50percent) and economic reasons (2.50percent) as in [Fig-2].

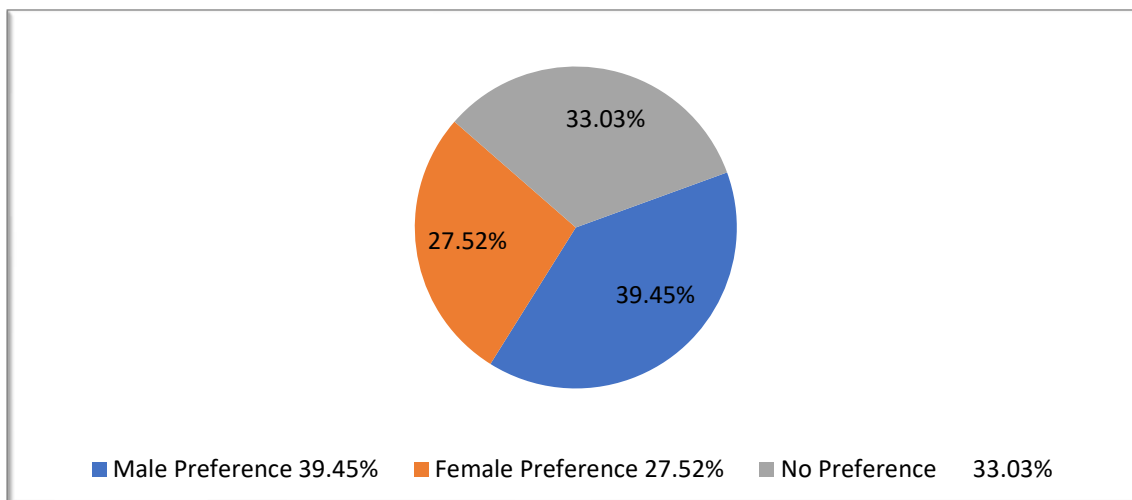


Fig-1: Gender preference in current pregnancy

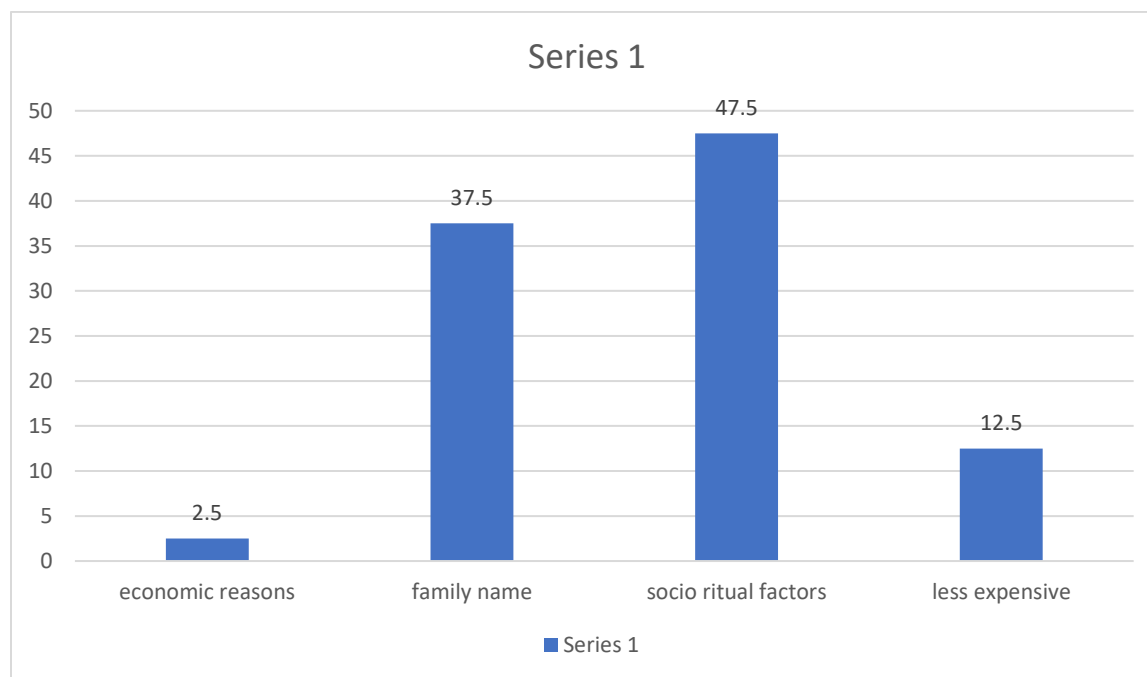


Fig-2: Reasons for preference of male child over female

Regarding the reasons for the preference of female child it was found that 51.35percent felt that girls and boys should be given equal rights, 18.92percent felt that female child is better care taker, 16.22percent of them wanted girl child due to divine reasons and 13.51percent of them want because of government incentives. [Fig-3].66.97percent

women didn't have the preference for the first male child but 29.36percent still wanted the first child to be a male child. An analysis was done to find association between various socio demographic variables and preference of male child as majority of our participants showed a male child preference.

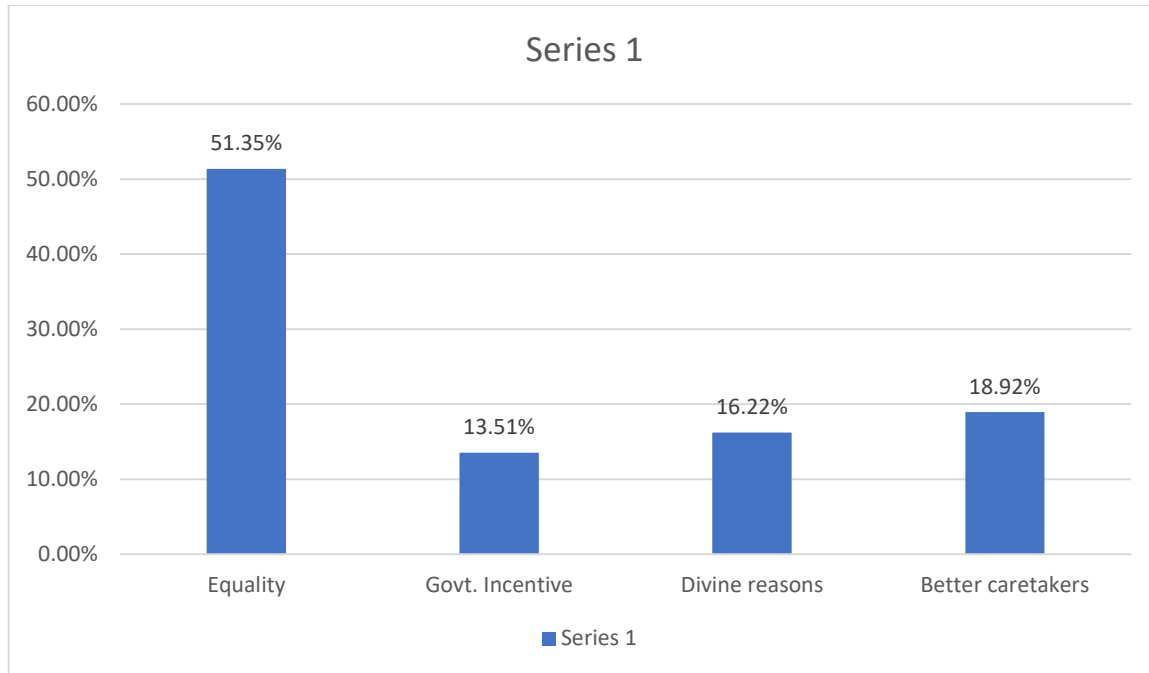


Fig-3: Reasons for preference of female child

On assessing knowledge regarding prenatal sex determination, it was found that majority of the participants i.e., 84.29 percent were aware about the legal age of marriage, 91.43 percent knew that pre-natal sex determination can be done and 67.14 percent also knew that it is an outpatient service done by USG technique. The main source of information regarding the possibility of pre-natal sex determination is media i.e., 54.44percent followed by relatives/ family members (34.67 percent), health care personals (7.91 percent) and friends (2.98 percent). About half of the study participants opined that sex determination can be done in private set up (49.26 percent) while 29.44 percent believed that it can be done in both private and government set up. However only 30percent study participants were aware about the PCPNDT Act and mostly the study participants (78.57 percent) said that prenatal sex

determination is a punishable offence. [Table-4]

Table-4: Awareness of antenatal mothers regarding issues of Sex determination	
Awareness	Frequency(percent)
Legal age of marriage	
Aware	84.29
Not Aware	15.71
Prenatal sex determination can be done	
Aware	91.43
Not Aware	8.57
USG technique used for sex determination	
Aware	67.14
Not Aware	32.86
Knowledge regarding PCPNDT Act	
Aware	30
Not Aware	70
Prenatal sex determination is punishable offence	
Aware	78.57
Not Aware	21.43

[Table-5] shows the perceptions of study participants regarding pre-natal sex determination. Regarding perceptions 30percent were in view that females should enjoy equal rights as males. 60percent of females expressed views that they would prefer to go for son even if the family gets completed with girl child and 5.71percent were willing to go for pre-natal sex determination. 15.71percent accepted that they would prefer to go for feticide if female foetus is conceived.

Table-5: Perceptions of study participants regarding pre-Natal sex determination	
Perceptions	Frequency(percent)
Females should enjoy equal rights as males	
Yes	30
No	70
Prenatal sex determination is justified	
Yes	18.57
No	81.43
Family is incomplete without a male child	
Yes	60

No	40
If yes, will go for sex determination	
Yes	5.71
No	94.29
In case female fetus is conceived, will go for feticide	
Yes	15.71
No	84.29

Discussion

Skewed gender ratios can have serious implications for a country's socio-demographic profile. India faces a demographic nightmare due to gender imbalance, with gender bias being a major concern, with long-term social and demographic consequences (Roy, 2017). The situation regarding boy preference in India is astonishing (Thapar et al., 2019). Therefore, it is very important to raise awareness about the impact of a female fetus among women.

This hospital based, cross-sectional study was undertaken in the OBG dept of tertiary health care hospital, Panipat, among 70 antenatal women. In the present study, gender preference for male child was found to be 39.45 percent, for female child it was 27.52 percent and no preference in 33.03 percent cases.

Limitation

The present study was conducted in a small population in hospital so the findings cannot be generalized in community. As the study deals with a sensitive issue, it might not reflect the original scenario.

Conclusion

The present study shed light on gender preferences and attitudes regarding prenatal sex determination and recent scenarios of strong will for male children among prenatal women in rural Panipat. There is a need to scale up unprecedented efforts against this societal ailment through an intensive IEC campaign to raise awareness of rules prohibiting prenatal sex determination to contain a female fetus. The present study also found the awareness regarding PCPNDT

act to be less but the son preference is more. Therefore, there is a need for community-based awareness programs to bring behavioral change among women and their spouses.

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Conflict of interest

None declared

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