

Research Article

A Study to Assess Knowledge and Attitude of Prevention of Female Feticide among Newly Married Couples in Sangli and Satara District

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ABSTRACT

Background: At present, female feticide is burning issue in over the entire world. Indian constitution says that gender equality is the fundamental right of every Indian. Scenario shows cruel face. Female feticide is widely occurred in India. **Objectives:** The objectives of the study were to assess existing knowledge and attitude regarding prevention of female among newly married couples in Sangli and Satara district. **Methodology:** The research design was analytical survey method. Settings of the study were Sangli and Satara district. Population of the study selected for the study comprised newly married couples staying in Sangli and Satara district. Sampling technique used was convenient, non-probability technique. Sample size was 50 married couples from each district. Method of data collection used structured interview schedule. Content validity of the tool was done by 14 experts from nursing, medical, language, legal, police, and education fields. Reliability was done with split-half technique $r' = 81$ (wife knowledge and attitude) $r' = 0.9$ (husband knowledge and attitude). Correlation coefficient $r' > 0.8$ was observed. **Results:** Wives and husbands had almost equal knowledge of the prevention of female feticide. Still 40% of subjects had not correct knowledge of the prevention of female feticide. Wives and husbands from Satara district had more desired attitude of the prevention of female feticide than Sangli district. **Conclusion:** Female feticide is big burning issue. It is multifactorial. Change in social system and social attitude will be the main measure. Every married couple will play a key role it.

Keywords: Female feticide, Knowledge and attitude, Newly married couple

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Introduction

Man and woman are the best creature of God. Both are equally capable to perform all the activities. Only women can give birth to male or female child. Woman plays key

roles at home as well as outside the home. In Maharashtra, survey showed that 95% of amniocentesis scan and USG were being carried for the sex determination.^[1] About 0.59% of pregnant women gave preference to male child. D.H.O, Sangli district reported the sex ratio is 840:1000.^[2] UN figures tell that about 750,000 girls are aborted every year in India.^[3]

Causes for female feticide are wrong belief – male child is more superior to female child, son Mania, girl is additional financial burden, son takes care of parent in old age, son carries out forward family name and occupation, and son does religious rites.^[4] Ill effects of female feticide are disturb family system, lack of brides, and increase sexual harassment.^[5]

As per some studies, the industry of ultrasound and sonography, sex selection, and female feticide is around

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500 corers in India and this is run through small clinics, midwives, unregistered doctors, and big hospitals. They conduct the abortions very secretly and many a times they become the reason for the death of many women. Many doctors are involved in this widespread malpractice to make easy money. Actually, it is a very profitable business. The machines have become cheaper, so even a new medical graduate can quickly set up a business. It may be illegal but it is very rare that in India, medical council debars anyone for ethical malpractice.^[6]

Honorable President Smt. Pratibha Patil instructed to Government of India to take serious action stop female feticide. Honorable Prime Minister Dr. Manmohan Singh gave orders to Chief Minister to “save the girl children.” Mrs. Supriya Sule, MLA, had organized 3 days rally for “save the female child” in Pune on August 28–30, 2011. Our most respected secretary Mr. Vishwajit Kadam sir is also started special campaign on “Mulagi havi ho.” Major activities to eradicate the female feticide are IEC on ill effects of female feticide and correct the misconceptions, implement strongly the act – PC-PNDTA, nurse should work as savior of female fetus, guidance and counseling to young adults and newly married women, launch “Save girls child campaign” by government and spiritual leaders, and parent should inculcate ethical codes strongly.

A study to assess effect of planned teaching on knowledge and attitude regarding female feticide among the college students of Mumbai was conducted. Sample size was 150, included 75 college girls and boys. The results were, planned teaching was highly effective and there was strong correlation between age, gender, education, religion, family income, and type of family and knowledge and attitude of college student on female feticide.^[7]

A KAP study conducted on female feticide among pregnant women in Gujarat. Sample size was 195. The results were, 65% of women gave preference to male child, 110 women were aware about consequences of female feticide and 40% of women admitted that they will go for female feticide.^[5] Researchers strongly felt that we should take part in “save the girl child” campaign. Hence, we select this problem for project work.

Statement of the problem was “a study to assess knowledge and attitude on prevention of female feticide among newly married couples in Sangli and Satara district.” The objectives were as follows: (1) To assess existing knowledge regarding prevention of female feticide. (2) To assess existing attitude regarding prevention of female feticide. (3) To find out association between selected sociodemographic variables and knowledge regarding prevention of female feticide. (4) To find out association between selected sociodemographic variables and attitude regarding prevention of female feticide.

The research variables were knowledge and attitude of the prevention of female feticide. We assume that wives have more knowledge and positive attitude than husbands.

Research Methodology

In present study the quantitative research approach was used and the research design was descriptive survey method. A setting of the study was newly married couples staying in Sangli and Satara district. The population selected for the study comprised newly married couples staying in Sangli and Satara district. A convenient, non-probability technique was used. Sample size was 50 newly married couples from each district. Structured interview schedule technique was used for collection of data separately for husband and wife. Tool has three sections. Section-I consists of sociodemographic variables of husband and wife. Section-II includes MCQ ON knowledge of prevention of female feticide. Section-III covers statement of attitude on prevention of female feticide with 3 points rating scale, strongly agree, neutral, and strongly disagree. Scoring was given as per positive and negative statements responses. Research tool was validated by 15 expert of community health, child health, obstetric, and gynecological from nursing and other expert from sociology, legal, and psychology. The reliability of the tool was determined by Karl Pearson’s coefficient of correlation and Brown’s prophecy formula. *r* values were 0.82 and 0.88; hence, the tools were found to be reliable. The data were analyzed using SPSS 20 software.

Analysis

Wives and husbands had almost equal knowledge of the prevention of female feticide. Still 40% of subjects had not correct knowledge of prevention of female feticide. Mostly gave correct response to -- means female feticide, -- investigation is used to detect of female sex, and -- service is needed to newly married wife or husband for prevention of female feticide [Table 1].

Wives and husbands from Satara district had more desired attitude of prevention of female feticide than wives and husbands from Sangli district. Best response was found to the statement no. 1, 2, 5, and 11. Data also showed that almost equal desired attitude was present in wives and husbands. Still about 1/3 subjects had not correct attitude toward the statements on prevention of female feticide [Table 2].

Ten and 6 husband and wives had good, whereas 32 husband and 30 wives had average level of knowledge of prevention of female feticide [Table 3].

Twenty-eight husbands and 22 wives out of 50 each had favorable attitude on prevention of female feticide. Overall unfavorable attitude to the statements found in 12 husbands and 14 wives [Table 4].

Discussion

A supportive study was conducted as “Knowledge and attitude of medical students and interns with regard to

Table 1: Distribution of subjects according to knowledge of prevention female feticide ($n=50=50=100$)

Knowledge on prevention of female feticide	Sangli district		Satara district	
	Husband	Wife	Husband	Wife
Is form of female abuse	15	13	13	14
Means female feticide	17	15	15	18
Is the sex ratio of Maharashtra state	16	14	18	12
Is cause of female feticide	14	13	16	12
May be risk factor for female feticide	17	15	14	14
Is ill effect of female feticide	15	18	16	16
Investigation is used to detect of sex of fetus	18	17	17	17
Law protect female feticide	19	16	13	14
Penalty is imposed to health personnel	15	14	18	16
For illegal fetal sex detection				
Penalty is imposed to wife/husband or other	16	11	15	14
Family member who involved in female feticide				
Campaign has started by GOI to prevent	17	13	18	15
Female feticide				
Activity has started by GOI to reduce	13	15	18	15
Female feticide				
Is the role of parent in prevention of	15	12	16	13
Female feticide				
Is role of nurse/health team member in	13	12	12	14
Prevention of female feticide				
Service is needed to newly married wife or	14	16	17	18
husband for preservation of female feticide				
Mean	15	15.26	15.73	14.6

Table 2: Distribution of subjects according to desired attitude of prevention of female feticide ($n+50=50$)

Attitude of subjects on prevention of female feticide	Sangli		Satara	
	Husband	Wife	Husband	Wife
Desired attitude				
Equal number of boys and girls increase status of society	20	19	21	20
Even few couples should not do detection of sex of fetus	21	18	22	20
Female fetus sex detection is not solution for dowry	18	20	20	20
Couple has no moral and legal right to choice for sex of fetus	19	19	21	21
Sex selection of fetus is wrong tool for control of population	20	18	21	21
Son or daughter equally takes care of parent	16	20	20	17
Son or daughter has ability to do religious rites	15	19	17	16
Son or daughter are equally powerful in all areas of life	16	17	14	14
Son or daughter is highly important for family	17	19	15	18
Son or daughter has equal rights of human	18	18	14	20
Female feticide is social evil for human	20	20	17	21
Every one duty is to take effort to prevent female feticide	15	19	21	20
Education and work to women prevent female feticide	18	17	20	20
Ideal couple never go for sex detection of fetus	17	19	20	21
	17.85	18.71	18.78	19.21

SA: Strongly agree, N: Neutral, SD: Strongly disagree

female feticide in New Delhi.” The results were 100% of students agreed the danger of female feticide, only 1/3 said that woman’s relative and doctors strictly punished for this act and need to sensitize these doctors about medical ethics.^[8]

There was association between age and occupation of newly married wife and knowledge of prevention of female feticide, whereas same variables showed association in newly married husband. There was association between education of newly married wife, occupation of newly

married wife, and attitude on prevention of female feticide and same variables showed association in newly married husbands.

Our study was supported by one of the study – A study was conducted on “Effect of planned teaching on knowledge and attitude regarding female feticide among college students of Mumbai.” The age group was 18–25 years with sample size 150 (Equal male and female students). The study showed significant association between knowledge and attitude with sociodemographic variables of students such as age, gender

Table 3: Distribution of subjects according to the level of knowledge of prevention of female feticide ($n=50+50=100$)

S. No.	Level of knowledge of prevention of female feticide	Husband	Wife
1	Good (more than 8 score)	10	8
2	Average (score 8)	32	30
3	Poor (<8 score)	8	12
(Qus. $15 \times 1 = 15$)			

Table 4: Distribution of subjects according to the level of attitude on prevention of female feticide ($n=50+50=100$)

S. No.	Level of attitude of prevention of female feticide	Husband	Wife
1	Favorable (more than 23 score)	28	22
2	Neutral (score 23)	10	14
3	Unfavorable (<23 score)	12	14
(Qus. $15 \times SA - 3 = 45$)			

education, religion, type of family, and family income at O.OILOS.^[7]

A study was to assess knowledge and attitude regarding female feticide among pregnant women attending antenatal clinic in selected hospital at Karad. The data show that good knowledge was 15%, 46% knowledge was average, and 39% was having poor knowledge regarding female feticide. Regarding attitude, the data show that 15% of women were having strong positive attitude, 59% of pregnant women were having positive attitude, and 26% of women were negative attitude toward female feticide. Result shows that there was no association with knowledge and demographic variable.^[9]

A study was conducted on effectiveness of public awareness program on prevention of female feticide and female infanticide in terms of knowledge and attitude of adults. The results showed that the pre-test knowledge scores mean was 28.19 and post-test knowledge scores mean was 39.48. The pre-test 54.65% of adults had moderately favorable attitude and 45.34% of adults had favorable attitude toward prevention of female feticide and female infanticide. The coefficient of correlation between pre-test knowledge and attitude scores was 0.266, suggesting a low correlation between pre-test knowledge and attitude scores of adults regarding prevention of female feticide and female infanticide. The computed r value (0.266) indicated positive correlation knowledge and attitude of prevention of female feticide.^[10]

A study was done on the attitude of gender preference and female feticide among women in selected settings at Mangaluru. The mean % score in the personal aspect of gender preference for unmarried and married women is highest as 70.97% and 72.37%, respectively. The findings also revealed that the mean% score in the area of awareness of female feticide among unmarried and married women is highest as 76.2% and 76.7%, respectively. Attitude of

unmarried and married women toward gender preference it reveals that majority of the unmarried women (86%) and married women (91.3%) have favorable attitude toward gender preference.^[11]

A study was conducted to evaluate the effectiveness of structured teaching program on knowledge regarding female feticide among degree college students in selected degree colleges at Bijapur. The data represented in the table show that the pre-test score range (3–18) was apparently less when compared to the post-test score range (13–29). The mean post-test knowledge score, 21.60 ± 6.241 was significantly higher than the mean pre-test knowledge score 11.54 ± 3.986 . This shows that there was apparent increase in the mean post-test knowledge score following the structured teaching program.

The above study also shows χ^2 value computed between the pre-test knowledge level of students on female feticide and selected demographic variables. Variables of sources of information ($\chi^2 = 10.8$), area of residence ($\chi^2 = 10.871$), income ($\chi^2 = 14.40$), and year of graduation ($\chi^2 = 7.9$) were significant at 0.05 level.^[12]

An article published on a hospital-based study on knowledge, attitude, and practice of pregnant women on gender preference, prenatal sex determination, and female feticide. India has witnessed a decline in sex ratio in the past few decades. A hospital-based cross-sectional study was carried out to find out the attitude toward gender preference and knowledge as well as practice toward prenatal sex determination and female feticide among pregnant women. A majority (66.0%) of the pregnant women did not show any gender preference followed by male preference (22.2%) and female preference (11.8%). A high proportion, that is, 84.7% and 89.7%, of the total subjects was aware that prenatal sex determination and female feticide are illegal, respectively.^[3]

Conclusion

Female feticide is big burning issue. It is multifactorial. Change in social system and social attitude will be the main measure. Every married couple will play key role it.

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Conflicts of Interest

Source of support: BVDU, Pune, has provided financial support for the study. The total funded amount was Rs.15,000.

Ethical Clearance

BVDU, CON, Sangli, Institutional Ethical Committee and BVDU, Pune, Ethical Committee gave permission and completion certificate for this study.

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