

## FEMALE FOETICIDE PERCEPTIONS AND PRACTICES AMONG WOMEN IN SURAT CITY

Shaikh Nawal<sup>1</sup>, Viradiya Hiral<sup>2</sup>, Thakkar Dhwanee<sup>3</sup>, Bansal RK<sup>4</sup>, Shah Dhara<sup>1</sup>, Shah Shashank<sup>1</sup>

<sup>1</sup>Ex-Intern, Department of Community Medicine <sup>2</sup>Resident, Department of Obstetrics & Gynaecology  
<sup>3</sup>Resident, Department of Paediatrics <sup>4</sup>Professor & Head, Department of Community Medicine, Surat Municipal Institute of medical Education & Research, Surat, India

### Correspondence:

Dr. R. K. Bansal

Professor & Head, Department of Community Medicine,  
 Surat Municipal Institute of medical Education & Research, Surat, India

Email: drrkbansal@gmail.com

### ABSTRACT

Female foeticide besides skewed sex ratio and its attendant social evils has grave ethical undertones, especially for medical professionals and our commitment to save lives. Randomly selected 270 women were interviewed using a semi-structured interview schedule to explore the female foeticide perceptions and practices among couples in Surat city. Only 148 (51.9%) of the women were aware of the fact that 3 female children killed every minute in India. Prenatal sex determination among their relatives and neighbours were reported by 80% respondent, though they themselves had never resorted to it. Could this figure influence the proxy rates for community behaviour, perhaps, this needs indepth exploration. Supporting to this fact, 25.9% respoindeents reported of ever been pressurized by their family members to undergo prenatal sex diagnosis of their foetus. Encouragingly 90% respondents had opined that that repeated prenatal sex diagnosis and abortions are detrimental to the mental and physical health of a woman and is wholly preventable. Stricter laws and honest enforcement of these laws were the commonest suggestions by respondent to prevent female foeticide in society.

**Keywords:** female foeticide, Gender, Sex ratio

### INTRODUCTION

Numerous studies have amply documented a tradition of systematic undervaluation of women in our country<sup>1-2</sup>. The male child preference is invariably expressed in various forms of female foeticide and infanticide subsequent to the misuse of sonography for prenatal sex determination. It is indeed saddening that while browsing newspapers one can sometimes come across news articles about such activities and about raids by Govt. officials against sonography clinics. The higher female mortality in Indian scenario<sup>1</sup> is amply brought out in the distorted sex ratio deficits of 2001 Census data due to systematic girl child discrimination/ killings, especially in the belt extending from northwest of India to parts of Rajasthan, Gujarat and Maharashtra<sup>3</sup> and has even been labelled as annihilation? Female foeticide besides skewed sex ratio and its

attendant social evils has grave ethical undertones, especially for medical professionals and our commitment to save lives. Arguably, it could perhaps be compared to the Holocaust, in any case such a scenario is simply not acceptable in a civilized society. Yet, on the other hand this problem is not there among the tribal or the so called backward communities. The Govt. of Gujarat has launched various welfare schemes in line with its firm commitment to deter female foeticide. The present study attempts to explore the female foeticide perceptions and practices among couples in Surat city.

### MATERIAL AND METHODS

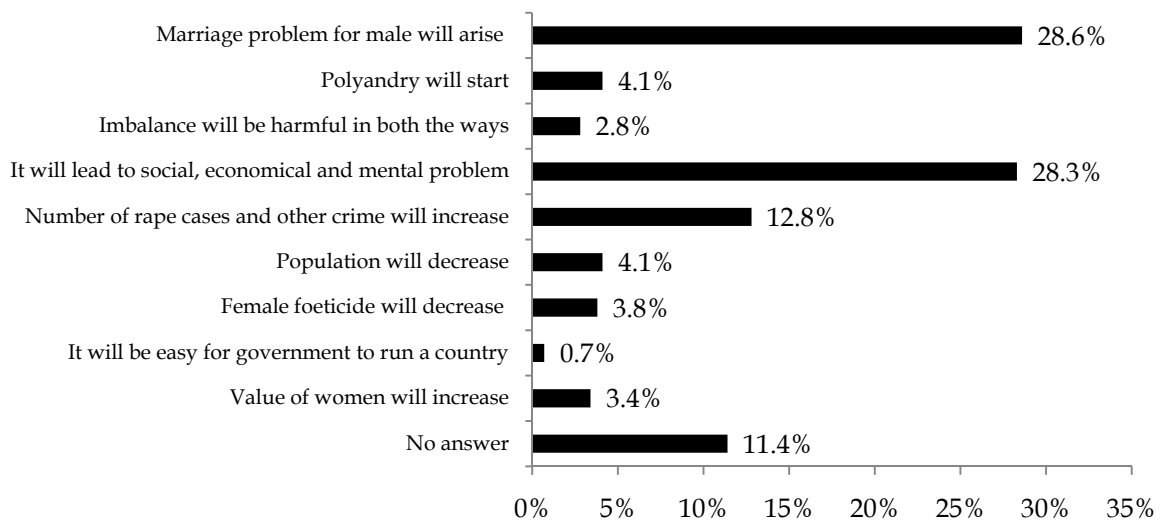
This study comprises of face to face interviews among 270 randomly selected families residing in Adajan Patia; Nanpura; Ghod Dod; Citylight; Sarthana Jakatnaka; Umarwada; Sagrampura;

Bhatar; Rustapura; Athwalines; Parle Point; Palanpur Patia; Majuragate; Ring Road; Ugat; Bhesan; Katargam; Ved Road; Varachha; Singanpore; Amroli of Surat, a city in south Gujarat which lies on the west coast of India. Informed consent has been obtained from all of the respondents. A semi-structured interview schedule was utilised for this purpose. The study period was spread over 29<sup>th</sup> March 2007 to 15<sup>th</sup> May 2007. Both the qualitative and the quantitative data has been analysed manually.

## OBSERVATIONS

It was observed that only 148 (51.9%) of the women were aware of the fact that 3 female

children killed every minute in India. When inquired as to whom they thought is responsible for female foeticide in terms of doer or seeker or both? The maximum number of respondents 227 (84.1%) had opined of the concept of shared responsibility of both in the context of female foeticide, followed by the seeker 22 (8.1%) and the doer 21 (7.8%). When asked about the various Govt. of Gujarat schemes 109 (40.4), 72 (26.7), 66(22.4) and 52(19.3) of the respondents were aware of the Kanya Kelavni Yojna, Janani Suraksha Yojna, Narmada Vikas Bond and Chiranjivi Yojna, highlighting the fact that the awareness about the government run schemes needs to be strengthened upon, as their awareness levels are quite low.



**Fig 1:** Effects of Decrease in Number of Females than Males as stated by respondents

Figure 1 reveals that the respondents are quite aware of the problems that could potentially occur in case of a scenario of deficit of females in our country consequent to gender selective abortions. The respondents had opined that the issue of prenatal sex determination assumes more importance in case the previous two children are girls and in such an instance of the total respondents only 13 (5%) had stated that they would resort to this technique, with the majority 227 (84%) being against this practice. 30 (11%) had firmly stated that they would not opt for the third child. This finding is encouraging given that during 1800, the British Government found that there were no daughters in a village in the Eastern Uttar Pradesh region of India.<sup>4</sup> Fortunately, we are not coming across such

instances lately. These opinions could imply that our society is now more comfortable with the concept of having girl children or that respondents are hesitant to acknowledge their desire for sons and are not forthcoming with an honest answer to this sensitive and ethical issue consequent to governmental and societal strong sanctions. It needs mention that Baru (1993)<sup>5</sup> had documented the association between sex determination tests and subsequent selective foeticide.

Interestingly 80% of the respondents had reported of prenatal sex determination among their relatives and neighbours, though they themselves had never resorted to it. Could this figure influence the proxy rates for community behaviour, perhaps, this needs indepth

exploration. 15% of the respondents had acknowledged that they had ever undergone an abortion, however not even in a single instance was this preceded by the reports of a girl child and interestingly 85.4% of the respondents gave no reason for undergoing the abortion. The vast

majority (85%) of the respondents had opined that the practice of female foeticide is commoner today as compared to the period twenty years ago and they attributed this to easy access to ultrasonography and chronic villa biopsy, making it easy for couples to get rid of girl child.

**Table 1:** Suggestions to Prevent Prenatal Sex Determination & Female Foeticide and Violence (n=277)

Suggestions	No.	%
Legal punishments & deterrence	17	6.1
Strict enforcement of law	42	15.2
Making newer laws	10	3.6
Stricter laws	47	16.9
Creating greater awareness of existing laws	3	1.1
Govt. should frame suitable laws against dowry	2	0.7
Give equal status to men & women	7	2.5
Increase awareness of these issues among women	2	0.7
Free education to women	3	1.1
Increase opportunities for employment of women	6	2.2
Frame and ensure equal rights for girls & boys	6	2.2
Give women appropriate positions in governance	2	0.7
Ensure reservation for women	3	1.1
Ensure protection to women	3	1.1
Increase female educational attainments	8	2.9
Steps & measures to curb violence against women	2	0.7
Economic encouragements for birth of female child	2	0.7
Doctors guilty of sex determination should be hanged	2	0.7
Prenatal sex determination test should be banned	15	5.4
Invent sonography machines unable to detect foetus gender	2	0.7
Governmental laws and campaigns are good enough	7	2.5
Spreading public awareness by religious leaders	18	6.5
Spreading awareness that child is god's gift	2	0.7
Government should stop taking bribes in such issues	2	0.7
Everyone should understand such issues in terms of humanity	3	1.1
No suggestions given	64	23.1

An encouraging finding is that 90% respondents had opined that that repeated prenatal sex diagnosis and abortions are detrimental to the mental and physical health of a woman and is wholly preventable. This finding is offset with 25.9% respondents reporting of ever been pressurized by their family members to undergo prenatal sex diagnosis of their foetus. 3.7 percent of the women had reported that after the birth of a daughter when they became pregnant again, they had been pressurized by the elders in the family to undergo abortion once the sex selective tests had determined that their foetus was a girl. 92.2% respondents believed that sonography plays an important role in female foeticide. 12.6% respondents had opined that the PNDT Act in the present set up will not be able

to keep a check on the cases of abortion based on prenatal sex diagnosis.

Table 1 reveals the multitude of reasons given by the respondents which they feel would help in dealing with this ghastly crime such as stricter laws and enforcement and are self explanatory.

## DISCUSSION

Sex-selective abortions have negated reductions in female mortality though improved care with an estimated 80 million missing females in India and China. The missing millions<sup>6</sup> has grave antisocial consequences of large cohorts of surplus marriageable males.<sup>7-8</sup> Govt. commitments alone are often inadequate; it

needs to be ensured that the citizens comprehend the government's infallible commitment, through laws and enforcement, forbidding infanticide, abandonment, and neglect of female children. Societies need to proscribe families who indulge in any of these, gender discriminatory, antisocial activities.

The strong son preference is strongly entrenched in India mind set and needs strong deterrence to prevent female foeticide.<sup>9</sup> It is heartening that the Central and the State Governments have indeed responded by formulating appropriate remedial laws and enforcing stringent regulation of these laws in an attempt to reduce the sex selection and selective foeticide and infanticide. However, recent studies have pointed out that sex selection techniques are still being practiced with impunity.<sup>10</sup>

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