**Statement of the Problem**

**“A Study To Assess Knowledge And Attitude On Prevention Of Female Feticide Among Newly Married Couples In Sangli And Satara District.**

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**Abstract** :

 Background: Presently female feticide is burning issue in over the entire world. In Indian constitution accepts gender equality is fundamental right. Scenario shows cruel face. Female feticide is widely occurred in India. Objectives: 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 of 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 & Attitude) r’=0.9 (Husband knowledge & Attitude) .Correlation coefficient r’> 0.8 was observed.

Major findings: Wives and husbands had almost equal knowledge on prevention of female feticide. Still 40% subjects had not correct knowledge on prevention of female feticide. Wives and husbands from Satara district had more desired attitude on prevention of female feticide than Sangli district.

 Conclusion: Female feticide is big burning issue. It is multi-factorial .Change in social system and social attitude will be the main measure. Every married couple will play vital role it.

**Key words: Knowledge, attitude, newly married couple and female feticide.**

**Background of the problem**

Man and woman is 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 vital 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 .59 % of pregnant women gave preference to male child. D.H.O, Sangli district reported the sex ratio is 840: 1000.2 International Institute for Population Sciences Mumbali. 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 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's 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 three days rally for ‘save the female child’ in Pune on 28 to 30 August 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 % women gave preference to male child, 110 women were aware about consequences of female feticide. And 40 % women admitted that they will go for female feticide. 5.

Researchers strongly felt that we should take part in ‘save the girl child’ campaign. So 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 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 socio-demographic variables and knowledge regarding prevention of female feticide 4.To find out association between selected socio-demographic variables and attitude regarding prevention of female feticide.

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

 **Research Methodology:**

 The quantitative, non-experimental research approach with descriptive survey design method. A setting of the study was newly married couples staying in Sangli and Satara district. The population selected for the study comprised of 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 3 sections. Section- I consists of socio-demographic 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 person’s coefficient of co-relation and Brown’s prophecy formula. The r values were 0.82 and 0.88 hence the tools were found to be reliable. The data was analyzed by using SPSS 20 software.

**Analysis**

|  |  |
| --- | --- |
| Table no .1 : Distribution of subjects according to knowledge on 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 |   |   |   |   |
|  | **15.6** | **15.26** | **15.73** | **14.8** |

Wives and husbands had almost equal knowledge on prevention of female feticide. Still 40 % of subjects had not correct knowledge on 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 no. 1.)

|  |  |
| --- | --- |
| Table no. 2 : Distribution of subjects according to desired attitude on 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 & 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 prevents 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 |
| **NOTE :**  |  |  |  |  |
| S.A : Strongly agree N: Neutral S.D: Strongly disagree  |  |  |  |

Wives and husbands from Satara district had more desired attitude on 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 towards the statements on prevention of female feticide. (Table no. 2)

|  |  |
| --- | --- |
| Table no.3 : Distribution of subjects according to level of knowledge on prevention  |  |
|  of female feticide n= 50+ 50 =100 |  |
| Sr.No. | Level of knowledge of preventionof female feticide | Husband  | Wife  |  |
|  |
| 1 | Good (more than 8 score) | 10 | 8 |  |
| 2 | Average (score 8) | 32 | 30 |  |
| 3 | Poor (less than 8 score) | 8 | 12 |  |
|  | (Qus. 15 x 1 =15) |  |  |  |

10 and 6 husband and wives had good where as 32 husband and 30 wives had average level of knowledge on prevention of female feticide. (Table no. 3)

|  |  |  |
| --- | --- | --- |
| Table no. 4 : Distribution of subjects according to level of attitude on prevention of  |  |  |
|  female feticide n= 50+ 50 =100 |  |  |
| Sr. No. | Level of attitude of preventionof female feticide | Husband  | Wife  |  |  |
|  |  |
| 1 | Favorable (more than 23 score) | 28 | 22 |  |  |
| 2 | Neutral (score 23) | 10 | 14 |  |  |
| 3 | Unfavorable (less than 23 score) | 12 | 14 |  |  |
|  | (Qus. 15 x S.A. 3 = 45 ) |  |  |  |  |

28 husbands and 22 wives out of 50 each had favorable attitude on prevention of female feticide. Over all unfavorable attitude to the statements found in 12 husbands and 14 wives.(Table no. 4)

**Discussion**

A supportive study was conducted as “Knowledge and attitude of medical students and interns with regard to female feticide in New Delhi. The results were 100% 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 on 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 to 25 years with sample size 150.(Equal male & female students) .The study showed significant association between knowledge and attitude with socio-demographic variables of students like age , gender education ,religion ,type of family and family income at o.o1LOS. 7.

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

 A study was conducted on effectiveness of public awareness programme 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 test54.65 % of adults had moderately favorable attitude and45.34 % 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 foeticide and female infanticide. The computed r value (0.266) indicated that positive correlation knowledge and attitude on prevention of female fecticide.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 on female feticide among unmarried and married women is highest as 76.2% and 76.7% respectively. Attitude of unmarried and married women towards gender preference It reveals that majority of the unmarried women (86%) and married women (91.3%) have favourable attitude towards gender preference. 11

A study was conducted to evaluate the effectiveness of structured teaching programme on knowledge regarding female foeticide among degree college students in selected degree colleges at Bijapur The data represented in the table shows 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±6.241was 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 programme

The above study also shows χ2 value computed between the pre-test knowledge level of students on female foeticide and selected demographic variables. Variables of sources of information (χ2 = 10.8), area of residence (χ2 = 10.871), income (χ2 =14.40) and year of graduation (χ2 = 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, i.e. 84.7% and 89.7%, of the total subjects were aware that prenatal sex determination and female feticide is illegal, respectively.13.

**Conclusion**: Female feticide is big burning issue. It is multi-factorial .Change in social system and social attitude will be the main measure. Every married couple will play vital role it.

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**Ethical clearance:** BVDU,CON, Sangli ,institutional ethical committee and BVDU, Pune ethical committee gave permission and completion certificate for this study.

**Bibliography:**

1. Deshpande JD, Phalke DB, PhalkeVD. Prenatal sex determination: issues and concern. Pravara Med Rev. 2009; 4(1)

2. Ministry of Health and Family Welfare. National Family Health Survey - 4 pg.no 2. <https://labour.gov.in/sites/default/files/MH%20District%20Level%20Report.pdf>. (18 Dec. 2019

3. [R Kansal](https://www.researchgate.net/scientific-contributions/56561855_R_Kansal?_sg%5B0%5D=3FWuGF7gD5EwC8Piq4etrH4cBKabs9H3NvjPeVtQ3aI1Za77JSKeq_DiM9g9O4vkKsH5cTk.-u3xc0sgvULxcUpg7706rxMar8Pv9e4UrH04KKlA2ovjKokit0Qh3RQd9p5qwpTk4pqb_chBXucgXtGfEJ00wQ&_sg%5B1%5D=qLn6F2UhyRMJtdSKgxfKBhdPevVbug_h7oOJ_4OmsHjMkFRIIttXcpyGxpverR8JZpHebLc._zpJblgIkQcmRqnQ-KA2vw2CoWnmn-z9lfcTQCECw6sV-KtH0xvKxsYwU9NdsN1zG1ReDa6kryyJhalWKeQxbQ) , Amir Ma , [R Bansal](https://www.researchgate.net/scientific-contributions/66644110_Rahul_Bansal?_sg%5B0%5D=3FWuGF7gD5EwC8Piq4etrH4cBKabs9H3NvjPeVtQ3aI1Za77JSKeq_DiM9g9O4vkKsH5cTk.-u3xc0sgvULxcUpg7706rxMar8Pv9e4UrH04KKlA2ovjKokit0Qh3RQd9p5qwpTk4pqb_chBXucgXtGfEJ00wQ&_sg%5B1%5D=qLn6F2UhyRMJtdSKgxfKBhdPevVbug_h7oOJ_4OmsHjMkFRIIttXcpyGxpverR8JZpHebLc._zpJblgIkQcmRqnQ-KA2vw2CoWnmn-z9lfcTQCECw6sV-KtH0xvKxsYwU9NdsN1zG1ReDa6kryyJhalWKeQxbQ) [P Parashar](https://www.researchgate.net/scientific-contributions/71304802_Pawan_Parashar?_sg%5B0%5D=3FWuGF7gD5EwC8Piq4etrH4cBKabs9H3NvjPeVtQ3aI1Za77JSKeq_DiM9g9O4vkKsH5cTk.-u3xc0sgvULxcUpg7706rxMar8Pv9e4UrH04KKlA2ovjKokit0Qh3RQd9p5qwpTk4pqb_chBXucgXtGfEJ00wQ&_sg%5B1%5D=qLn6F2UhyRMJtdSKgxfKBhdPevVbug_h7oOJ_4OmsHjMkFRIIttXcpyGxpverR8JZpHebLc._zpJblgIkQcmRqnQ-KA2vw2CoWnmn-z9lfcTQCECw6sV-KtH0xvKxsYwU9NdsN1zG1ReDa6kryyJhalWKeQxbQ). A hospital-based study on knowledge, attitude and practice of pregnant women on gender preference, prenatal sex determination and female feticide. October 2010 . Indian journal of public health 54(4):209-12

4. <https://en.wikipedia.org/wiki/Female_foeticide_in_India>. ( Retrieved on 12 Sept.2019.

5. N Vadera, U Joshi, S Unadakat, B Yadav, Sudha S . Study on knowledge, attitude and practices regarding gender preference and female feticide among pregnant women. Indian journal of community medicine . Vol. 32, No. 4, October 2007 .pg. 300-2 <http://medind.nic.in/iaj/t07/i4/iajt07i4p300.pdf>.

6. Dhaval K.Disha S. Female foeticide: Blame it on portable, unregistered sonography machines. Updated: Mar 15, 2017. <https://www.dnaindia.com/health/report-portable-machines-used-in-sex-determination-2352951>

7. Sonawane N. Effect of planned teaching on knowledge and attitude regarding female foeticide among college students of Mumbai. [Nurs J India.](https://www.ncbi.nlm.nih.gov/pubmed/20862836) 2010 Mar;101(3):63-5.

8. Nath A , Sharma N, Gopal K, Ingale. Knowledge and attitude of medical students and interns with regard to female feticide. IJCM 2009 April; 34 (2): 164-165.

9. Kapurkar, K Salunkhe. J.Patil. S. Jagdale, S. A study to assess knowledge and attitude regarding female feticide among pregnant women attending antenatal clinic in selected hospital at karad. Volume 3 Issue 11, November 2014 PG 1077-1080

 10. Shyama D. Jyoti S. Rathish N. effectiveness of public awareness programme on prevention of female foeticide and female infanticide in terms of knowledge and attitude of adults. International Journal of Nusring Education and Research. 2 (2): April –Junw; 2014.pg. 126-30

 11. Mercy Z, Darryl M, Serafine A, Shwetha Rashmi M. A study on the attitude of gender preference and female feticide among women in selected settings at mangaluru. International journal of health sciences & research..Vol.7; Issue: 12; December 2017. Pg. 104-114. <https://www.ijhsr.org>

12.Shirin S. A study to evaluate the effectiveness of structured teaching programme on knowledge regarding female foeticide among degree college students in selected degree colleges at Bijapur . IOSR Journal of Nursing and Health Science (IOSR-JNHS) .Volume 6, Issue 5 Ver. IV. (Sep. -Oct .2017), PP 61-64. [www.iosrjournals.org](http://www.iosrjournals.org)

13. [R Kansal](https://www.researchgate.net/scientific-contributions/56561855_R_Kansal) [Amir Maroof Khan](https://www.researchgate.net/profile/Amir_Khan27) . [R. Bansal](https://www.researchgate.net/scientific-contributions/66644110_Rahul_Bansal) . [P Parashar](https://www.researchgate.net/scientific-contributions/71304802_Pawan_Parashar). A hospital-based study on knowledge, attitude and practice of pregnant women on gender preference, prenatal sex determination and female feticide [Indian journal of public health](https://www.researchgate.net/journal/0019-557X_Indian_journal_of_public_health).  54(4):209-12 .