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SEX COMBINATION OF LIVING CHILDREN AT THE TIME OF STERILIZATION AMONG RURAL WOMEN OF CENTRAL INDIA

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ABSTRACT

Background: The sex ratio in India has been generally adverse to women. Strong preference for the son has been attributed mainly to the traditional religious beliefs and old age support for the parents. Disturbed sex ratio has been identified as a big threat to the family structure and cause for communal disharmony and rise in crime against women. **Material and Methods:** A hospital based observational study was carried out among 1688 women who had undergone voluntary sterilization operation at Pravara Rural hospital, Loni, Maharashtra during the period of Jan. 2006 to Dec. 2010, to find out the sex combination preferences of children before adopting permanent method of sterilization. Information regarding number of living children and the preferred sex combination of children was collected through personal interview of women. Data was analyzed in the form of percentage and proportions. **Results:** Women undergoing sterilization operation had higher average number of male living children (1.57%), compared to number of female living children (1.41%). Only 4% of women accepted sterilization without a male child, whereas 25% accepted sterilization without a female child. One male and one female child (28.70%) was the most preferred sex combination followed by two male children (20.65%) and two male and one female (13.71%) child. **Conclusion:** Two children with sex combination of one male and one female child was the commonest preferred sex combination followed by two male children among sterilization acceptors. Mass education on value of the girl child, intensive efforts to raise the status of the girl child will give them their rightful place in society.

Key words: *Gender Preference, Sterilization Acceptance, Sex Ratio, Rural Women*

INTRODUCTION

Gender discrimination in the form of preference for son is known to exist in India since decades. Evidence to this preference is reflected through the sex ratio, which has consistently showing downward trend since last few decades. Women are accorded an inferior status in the family and in the society (United Nations., 1987). Repeated birth of the female child is considered as a curse and birth of the boy has been the time for celebration and jubilation. Researchers in many countries have studied the impact of gender preference on fertility in terms of effect of sex combination of children on family size limitation (Arnold, 1984; Bhatiya, 1978, Das, 1987; Park, 1983; and Mukerjee, 1977, Widmer *et al.*, 1991). Preference for male children is especially prevalent in South Asia, East Asia and North Africa, while in majority of European and Latin American countries, a balanced sex combination is seen (Reddy, 1984). The world fertility data of south east countries like Nepal, Pakistan and Bangladesh have shown the evidence of preference for boys than girls. In India too, a strong preference for son exists and has been attributed mainly to traditional religious beliefs and as old age support for the parents. Several studies have revealed that the acceptance of permanent methods of family planning increases with an increase in the number of sons, regardless of the number of living daughters (Arnold *et al.*, 1984, Sarma *et al.*, 1974; and Lahiri, 1974). Hence this present study aims at measuring the influence of different sex combinations of living children within the family, on the adoption of permanent method of family planning amongst women in rural area of central India.

MATERIALS AND METHODS

A hospital based observational study was carried out among 1688 women who had undergone voluntary sterilization operation at Pravara Rural Hospital (PRH), Loni situated in rural area of Ahmednagar district of Maharashtra, central India during the period of five years from January 2006

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to December 2010. PRH is a tertiary level health care centre that caters to the needs of the Ahmednagar district and comes under the aegis of Pravara Medical Trust. The majority of the patients at PRH come from rural areas. Data regarding number of living children and the preferred sex combination of children was collected from the women who had undergone sterilization operation during study period. Institutional Ethical Committee approval was obtained for the study. Data was analyzed in the form of percentage and proportions whenever appropriate to find out the preferred sex combination of children among sterilization operation acceptors.

RESULTS

Present study revealed that the average age of the women at marriage was 18.5 years and the average age at the time of acceptance of sterilization was 23 years. The final decision of sterilization operation was taken by husband in consultation with his parents in most (88%) of the cases. Women had passive role in decision making due to their inferior status in the family.

The distribution of acceptors as per the sex combination of children was shown in Table 1. Two children with sex combination of one male and one female child was the commonest preferred sex combination (28.70%) followed by two male children (20.65%) among sterilization acceptors.

The distribution of sterilization acceptors by number of male and female living children was depicted in Table 2. It was observed that the number of sterilization acceptors were more after each additional male child as compared to female child. Only 4% of acceptors accepted permanent method of sterilization in the absence of male child, where as 25% accepted it in the absence of female child.

Table 1: Distribution of Acceptors by Sex Combination of Children

Sex combination of children (M: Male and F: Female)	No. of cases (n=1688)	Percentage
1M & 1F	484	28.70
2M	348	20.65
2M & 1F	232	13.71
1M & 2F	229	13.53
2M & 2F	95	5.65
1M & 3F	83	4.88
2F	27	1.60
Other combinations	190	11.25

Table 2: Distribution of Percentage of Acceptors by Number of Male and Female Living Children

No. of Male living children	No. of Female living children						Total
	0	1	2	3	4	5	
0	-	0.52	1.60	1.11	0.68	0.17	4.11
1	1.28	28.70	13.53	4.88	1.19	0.59	50.21
2	20.65	13.71	5.65	0.85	0.08	0.17	41.13
3	2.99	0.59	0.08	-	-	-	3.68
4	0.51	0.25	0.08	0.08	-	-	0.85
Total	25.44	43.78	20.99	6.85	1.97	0.94	100

Table 3: Distribution of Acceptors of Sterilization in Relation to Average no. of Male and Female Living Children in Family

Year	Percentage of average no. of living children		
	Male	Female	Total
2006	1.65	1.56	3.21
2010	1.50	1.26	2.76

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Table 4: Time Trend of Acceptors for Sterilization According to Total No. of Living Children

Total no. of living children	Percentage of acceptors for sterilization		Trend
	(Year 2006)	(Year 2010)	
1	1.01	1.36	Increased
2	25.62	45.26	Increased
3	41.19	33.27	Decreased
4	20.42	15.63	Decreased
5	11.73	4.46	Decreased

The distribution of sterilization acceptors in relation to average number of male and female living children in family was shown in Table 3. There has been a change towards acceptance of small family over last decade. Continued preference for the male child over female child is reflected in the table.

As observed from Table 4 that the distribution of sterilization acceptors according to total number of living children. There is a transition towards smaller family size (from 3 living issues to 2 living issues). The percentage of sterilization acceptors with two or less than two children has increased over last five years (27% in 2006 versus 47% in 2010).

DISCUSSION

Preference for male child over the female has been a part of Indian culture and mindset since time immemorial. In Indian culture, the male members, especially the son plays an important role during family rituals like cremation of parents. Son is considered to be one, who will carry forward the family and the property. He is been supposed to earn for whole family and safeguard it from evil forces in the community. He is considered as an old age support for the parents, since females leave the parents house after marriage and become part of some other family (Arnold, 1984; Das, 1987). In this study, the final decision of sterilization operation was taken by husband in consultation with his parents in most (88%) of the cases. Women were ascribed with the main role of childbearing and rearing. They were kept away from education and thus were made economically dependent on the male members of the family. They were not involved in any sort of family financial matters. Traditionally, women have always been thought to be weak, less capable and inferior to men in performing important task. For the aforementioned reasons, sons were preferred over daughters. In male dominant society, women are kept deprived of their reproductive health rights. They do not have any say on their sexuality or the reproduction. They are kept away from education, married at tender age; carry burden of early and repeated pregnancies (Park, 1983). The male dominance further prevents the woman from undergoing sterilization operation, in the absence of desired sex combination of children. For want of the son, many women continue to have additional children till desired sex combination is achieved (Malhi *et al.*, 1999).

In the present study, it was observed that the most preferred sex combination was one male and one female child. It was followed by two male children in the family. The percentage of couples accepting sterilization with only one child, male or female, was extremely low. The preference for the son is also very evident from the observation of six times higher percentage of couples accepting sterilization with all male children as compared to couples with all female children. Similar observations have been reported by many other studies (Reddy, 1984; Sarma, 1974; Lahiri, 1974; Malhi *et al.*, 1999). Many pregnancies are aborted after illegal prenatal sex determination by ultra sonography. This has resulted in altered sex ratio in favour of sons. The sex ratio figures are disturbing in few of the states like Rajasthan, Punjab, Hariyana and Maharashtra. With various laws and awareness programmes in favour of women, the things have started changing in favour of females. As a result of continuous propagation of small family norm by the government, the demographic scenario of India appears to be undergoing a slow change in term of the desired family size adopted by the couples. On an average, there is steady change with more and more women,

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especially the educated couples are accepting two child norms, with equal number of male and female living children in the family at the time of acceptance of permanent method of sterilization.

There have been regional variations regarding the desire for sons over daughters. Northern states of India exhibit stronger preference for sons as compared to southern states (Bhatiya, 1978; Dasgupta, 1987; Dyson *et al.*, 1983). It could be attributed to the strong dowry system, which considers daughter as liability to the family in long run. There are other cultural differences in terms of marriage practices, kinship structure, property inheritance rights and status of the women (Dasgupta., 1987, Dyson *et al.*, 1983). Several studies in India have reported the effect of sex preference on fertility. A study by (Das, 1987) analyzed that the parity progression ratios of women in south Gujarat and reported that the number and sex combination of living children were significant predictors of the parity progression ratio in urban and rural areas. Women face gender inequalities in respect to access to education, employment and health care in many underdeveloped states (Malhi *et al.*, 1999). Women are treated as second class citizens and are ill treated at various walks of life, may it be home setting, society or at workplace. There is high crime rate against women. There is gross violation of reproductive and sexual rights. All these lead to suppression of women in male dominant society.

CONCLUSION

The study indicates that the high adoption of male sterilization as against female sterilization among the acceptors in the study area and a higher average of male living children among the acceptors as compared to the average number of female living children. In spite of the continuous efforts by the government to remove the gender bias, preference for male child over female continues in the rural area of India. Strong desire for sons, continue to push the couple to resort to various methods of sex determination and illegal termination of pregnancies. Strict implementation of law against foetal sex selection will go a long way in stabilizing the disturbed sex ratio. Mass education on value of the girl child, intensive efforts to raise the status of the girl child will give them their rightful place in society.

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