An exploratory study to assess gender preference and its factors among primigravida women attending antenatal outpatient department in selected hospital of district Mohali, Punjab

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Abstract
The social evils, female feticide and infanticide can be eradicated only when people recognize the importance of women in their life. Preference for male baby reflects underlying socioeconomic and cultural patterns and prevailing inequity between genders in many societies in India. In this light, the present was conducted to assess the factors associated with gender preference among primigravida women attending antenatal outpatient department in selected hospital of district Mohali, Punjab. A non-experimental exploratory research design was adopted for the study. This study was conducted in Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab. The sample of 100 primigravida mothers were drawn from Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab by using purposive sampling technique in the month of March 2024. The results revealed that majority of primigravida mothers 78 had son preference and their mean score with son preference was high (84.63±26.833). Hence, it was revealed that that there was no significant association between the factors of gender preference with primigravida mothers with age, religion, residential area, educational status, occupation, income type of family and type of marriage.

Keywords: Primigravida women, gender preference, Mohali, Punjab

Introduction
Being pregnant and giving birth is like crossing a narrow bridge: people can accompany you to the bridge, and they can greet you on the other side, but you walk that bridge alone. And the journey doesn’t end there: children are the future of a society and special gifts to the world. Changes in our society and world require us to be attentive to and value them and their health [1].

India is a patriarchal society where men are seen as the role models and are the ones to look after the parents in the old age. Sex ratio is an important social indicator measuring status and equity between male and female in the society. Changes in sex-ratio reflect socioeconomic and cultural practice of a society. In India, deaths of young girls exceed those of young boys over three lakhs each year, and every sixth infant death is specifically due to gender discrimination. The United Nations Children's Fund states that systematic gender discrimination has resulted in up to 50 million girls & women “Going Missing” from India's population [2]. The bias against females in India is grounded in cultural, economic and religious roots. Sons are expected to work in the fields, provide greater income and look after parents in old age. In this way, sons are looked upon as a type of insurance. In addition, in a patriarchal society, sons are responsible for "preservation" of the family name. Also, as per Hindu belief, lighting the funeral pyre by a son is considered necessary for salvation of the spirit.2

The Indian sex ratio has shown a secular decline since the beginning of the twentieth century excepting some reverse trend of improvement during 1951, 1981 and 2001. Though, the overall sex ratio in India has increased by 0.75% in the last decade. The child sex ratio continued to decline over the decades (976 in 1961 to 927 in 2001). In a shocking revelation, the child sex ratio between 0-6 years age group has dropped to all time low since independence to 914 females against 1000 males as given by 2011 census of India [3].
With the availability of new technology of sex determination, the bias suffered by Indian females from birth to the grave is extended now from womb to tomb. A steep decline in the sex ratio in recent years has coincided with an increased availability of ultrasound machines. These methods have rendered early sex determination inexpensive, feasible and easily accessible. Major number of the abortions is being performed to terminate female fetus. More than 10 million female fetuses have been aborted over the last two decades. Lesser the number of women in the society, violence against them in all possible forms would increase to a greater extent. Such an atmosphere of insecurity would again lead to a situation where women will be confined within the four walls for security [3].

Need of the study
Creating an awareness regarding gender preference and female feticide is very vital. From number of reviewed literature, it is found that different people have different views/ ideas regarding gender preference and female feticide. As there is a saying, a woman is one of God’s greatest and complex creations. Eliminate inequality, not women; destroy dowry, not daughters, daughters are not for slaughter [1].

One of the Sustainable Development Goals (SDG17) is to ensure gender equality and non-gender discrimination at all levels. Nonetheless, gender-biased selection at birth is still a widespread socio-cultural issue in many countries and communities. This is a great issue that can cause gender imbalance and affect the human rights. Since 1994, and more recently, 2011, the United Nations and its affiliated organizations including the Office of the High Commissioner for Human Rights (OHCHR), United Nations Population Fund (UNFPA), United Nations Children’s Fund (UNICEF), United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), and World Health Organization have issued a joint statement affirming the need to eliminate gender-based discrimination, including son preference. Many countries around the world have also introduced gender equality policies and limited sex selection at birth, as well as implemented community interventions to raise awareness of people’s gender equality rights and sex selection [4].

A family is the most fundamental unit in the human society. The household size and its composition are an important aspect of the family, and the society at large. A balanced sex ratio plays a vital part in bringing out, and maintaining a stable society. People in India exhibit a strong gender preference for male child and this discrimination or prejudice continues in spite of socio-economic development and higher growth rates. The preference for sons has been associated with preferential abortion of female fetuses and even to female infanticide. This differential treatment given to the girls and the sex-selective illegal abortions has resulted in estimated 30 to 70 million “missing” women in India [5].

The social, cultural, and religious fiber of India is predominantly patriarchal contributing to the secondary status of women and masculinization of the sex ratio. According to NFHS-4, the sex ratio was 991 females per thousand males and sex ratio at birth was 919. Sex ratio at birth depicts the factors that could have come into play before birth. According to the Census of India data, for every 1000 boys (in the 0–6 years’ age group), there are 919 girls in the year 2011, a decline from 927 in 2001. This demographic imbalance which is caused to the declining sex ratio is a matter of concern to the policymakers, implementers, demographers, and social reformers. Preference for son is so intense that it leads to larger family size, closed pregnancies, premature deaths, and even terminating the child before it is born [4].

Statement of the Problem
An exploratory study to assess gender preference and its factors among primigravida women attending antenatal outpatient department in selected hospital of district Mohali, Punjab.

Objectives
1. To assess gender preference among primigravida women attending antenatal outpatient department.
2. To explore the factors of gender preference among primigravida women attending antenatal outpatient department.
3. To associate the findings with their selected socio demographic variables.
4. To analyse and disseminated the findings.

Operational Definitions
- **Gender Preference**: it refers to the desire of biological parents for either a male or female child.
- **Primigravida**: A woman who is pregnant for the first time and being present at the time of data collection in Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab.

Assumptions
The primigravida may be strongly having a particular desire regarding the gender of her fetus.

Limitations
The data on the gender preference is gathered through interview schedule which may not be completely reliable.

Delimitations
The study was delimited to the primigravida women who were:
- Attending antenatal OPD of selected hospital of Mohali, Punjab.
- Available during data collection period.
- Willing to participate in the study.

Methodology
Research Approach
A quantitative approach was adopted for the study to assess gender preference and its factors among primigravida women attending antenatal outpatient department in selected hospital of District Mohali, Punjab.

Research Design
Non-experimental, Exploratory research design was chosen for the present study.

Research Setting
The study was conducted in Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab. The reasons for selecting these hospitals were:
- Abundant of sample as Civil Hospital, Phase- 6 of
Mohali is less expensive with 24 hours service.
- Familiarity of area as we were posted there during graduation course also.
- Investigators convenience as it is nearby the college and from the investigator’s place of residence.
- Expected cooperation from head of the department in getting permission for conducting the study. The staffs were familiar and quite cooperative.

Cooperation from the mothers as there were the samples in the antenatal ward, the investigator had enough time and sample to be selected for the study and to conduct the research (Data collection procedure)

Target Population
The target population of the study comprised of all primigravida mothers attending antenatal OPD of Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab.

Sample Size and Sampling Technique
100 primigravida mothers were taken as samples. A Purposive sampling technique was used to draw the samples.

Inclusion Criteria
Inclusion criteria for the study are.
- The primigravida mothers.
- Who are available at the time of research study.

Selection and Development of Tool (s)
The tool was developed to assess the gender preference and its associated factors among primigravida mothers attending antenatal outpatient department in selected hospital of district Mohali, Punjab. Extensive review of literature i.e books, journals, expert opinion and the investigator’s professional experience provided basis for construction of the structured tool.
The tool was divided into two parts.
- Part-A: Socio-Demographic Data
- Part-B: Interview Schedule

Pilot Study: Pilot study was conducted during the month of January 2024 at Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab to find out the feasibility of the study. The sample taken was 10 primigravida mothers. The test was conducted through interview schedule. The descriptive and inferential analysis of pilot study was done in accordance with the objectives. The findings of the data revealed that study was feasible.

Data Collection Procedure
A formal written permission was obtained from Senior Medical Officer of Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab, after discussing the purpose and objectives of the study with them. Also, permission from the primigravida mothers prior to the data collection was taken by explaining the purpose of the study and consent was taken from them. They were also assured about their confidentiality.
Data collection procedure was carried out in the month of March 2024, in Dr. B.R Ambedkar State Institute of Medical Science, phase 6, Mohali, Punjab.

Ethical consideration
- Written Permission was taken from the ethical committee of the Rayat Bahra College of Nursing, Mohali.
- Written Permission was obtained from the hospital authority for conducting the study.
- Verbal and Written consent was obtained from the study subjects.
- Hospital routine was not disturbed.
- Confidentiality was maintained throughout the study.

Plan of data analysis
- Coding sheet was prepared for data analysis.
- Data were analyzed by using descriptive and inferential statistics.
- Distribution of Primigravida mothers according to their socio-demographic variables was computed by chi square test.
- Association between the level of score and socio demographic variable found by Chi square test.

Data Analysis
Analysis and interpretation was done in accordance with the objectives laid down for the study. The data was analyzed by calculating the score in terms of mean; mean percentage, and standard deviation. Chi square test was used for assessing association between the variables. The level of significance chose was p<0.005.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Opts</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>18-23 years</td>
<td>39</td>
<td>39%</td>
</tr>
<tr>
<td></td>
<td>24-29 years</td>
<td>30</td>
<td>30%</td>
</tr>
<tr>
<td></td>
<td>30-34 years</td>
<td>30</td>
<td>30%</td>
</tr>
<tr>
<td></td>
<td>Above 35 years</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Educational Status</td>
<td>No formal education</td>
<td>30</td>
<td>30%</td>
</tr>
<tr>
<td></td>
<td>Primary</td>
<td>31</td>
<td>31%</td>
</tr>
<tr>
<td></td>
<td>Secondary</td>
<td>9</td>
<td>9%</td>
</tr>
<tr>
<td></td>
<td>Graduation and above</td>
<td>30</td>
<td>30%</td>
</tr>
<tr>
<td>Residential Area</td>
<td>Rural</td>
<td>59</td>
<td>59%</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>41</td>
<td>41%</td>
</tr>
<tr>
<td>Religion</td>
<td>Hindu</td>
<td>64</td>
<td>64%</td>
</tr>
<tr>
<td></td>
<td>Muslim</td>
<td>8</td>
<td>8%</td>
</tr>
<tr>
<td></td>
<td>Sikh</td>
<td>27</td>
<td>27%</td>
</tr>
</tbody>
</table>

Table 1: Frequency and percentage distribution of nulliparous mothers according to their socio- demographic variables N=100
Table 2: Scores of Gender preference among primigravida women attending antenatal outpatient department. N= 100

<table>
<thead>
<tr>
<th>Gender Preference</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Son preference</td>
<td>78</td>
<td>78.0%</td>
</tr>
<tr>
<td>Girl preference</td>
<td>2</td>
<td>2.0%</td>
</tr>
<tr>
<td>No preference</td>
<td>20</td>
<td>20.0%</td>
</tr>
</tbody>
</table>

Table 2 states that out of 100 primigravida women, majority of primigravida women 78 (78%) had preferred son preference whereas only 2 primigravida women had girl preference. Only 20 (20%) of the primigravida women had no particular desired gender preference.

Table 3: Comparison of Scores of Gender preference among primigravida women attending antenatal outpatient department. N= 100

<table>
<thead>
<tr>
<th>Anova</th>
<th>Factors</th>
<th>Son Preference</th>
<th>Girl Preference</th>
<th>No preference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>84.63</td>
<td>43.36</td>
<td>38.75</td>
<td></td>
</tr>
<tr>
<td>S.D.</td>
<td>26.33</td>
<td>28.216</td>
<td>27.639</td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Maximum</td>
<td>100</td>
<td>100</td>
<td>93.75</td>
<td></td>
</tr>
<tr>
<td>Minimum</td>
<td>12.5</td>
<td>9.0909091</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>Range</td>
<td>87.5</td>
<td>90.909091</td>
<td>68.75</td>
<td></td>
</tr>
<tr>
<td>F test</td>
<td>83.951</td>
<td></td>
<td>12.592</td>
<td></td>
</tr>
</tbody>
</table>

Table 4: Association of gender preference scores and its factors with selected socio-demographic variables N= 100

<table>
<thead>
<tr>
<th>Demographic Data</th>
<th>Levels of Factor (N=100)</th>
<th>Association with factor score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variables</td>
<td>Son Preference</td>
<td>Girl Preference</td>
</tr>
<tr>
<td>Age</td>
<td>18-23 years</td>
<td>29</td>
</tr>
<tr>
<td>Educational Status</td>
<td>No formal education</td>
<td>22</td>
</tr>
<tr>
<td>Residential Area</td>
<td>Rural</td>
<td>44</td>
</tr>
<tr>
<td>Religion</td>
<td>Hindu</td>
<td>51</td>
</tr>
<tr>
<td>Occupation</td>
<td>Private Employee</td>
<td>11</td>
</tr>
<tr>
<td>Income</td>
<td>Below Rs. 5,000/-</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Rs. 5,000-10,000/-</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Rs. 10,000-15,000/-</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Rs. 15,000 and above</td>
<td>28</td>
</tr>
<tr>
<td>Type of Family</td>
<td>Nuclear</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>44</td>
</tr>
</tbody>
</table>
Table No 4. Shows the association of gender preference scores and its factors with selected socio-demographic variables

Discussion
It was inferred that according to age, maximum 39 primigravida mothers were between age group of 18-23 years. According to educational status, the majority of the primigravida women 31 had primary level of education. According to Residential Area, the majority of the primigravida women 59 resided in rural areas. According to Religion, the majority of the primigravida women 64 were Hindus. According to Occupation, majority of the primigravida women the majority of the primigravida women 68 were housewives. According to family monthly income, majority of the 39 primigravida women had income between Rs. 10,001-20,000/- . According to Type of Family, majority of the primigravida women 57 belonged to joint family.

In the present study the findings shows a significant major scores of gender preference factors among primigravida women states that out of 100 primigravida women, majority of primigravida women 78 (78%) had preferred son preference whereas only 2 primigravida women had girl preference. Only 20 (20%) of the primigravida women had no particular desired gender preference.

Conclusion
From the findings of present study following conclusions were drawn:
- Majority of primigravida women 78 out of 100 had preferred son preference.
- There were significant differences in the means of factors related to son preference, girl preference, and no preference.

The socio-demographic variables such as age, religion, education, income of family per month, occupation, residential area and type of family had no influence on the gender preference choice of primigravida mothers

Recommendations
Based on the results of study following recommendations are made:
1. The study can be replicated on large sample to validate and generalize its findings.
2. Similar studies can be conducted in different settings like community.
3. A pre experimental study can be conducted to assess the effectiveness of structured teaching program on gender preference and its associated factors among primigravida women in community or hospital.
4. Similar study can be done by using randomization principle

Acknowledgement
As we embark on my journey in life, we look back with gratitude on all my teachers who have molded us in school, college, and during my graduation studies. They were milestones and light houses of knowledge. I can never forget all they have done for us in my academic pursuit. With profound joy and gratitude, the investigator acknowledges the help of those who have been involved in the successful completion of this endeavor. First of all, we thank the Lord Almighty for His abundant blessings showered upon us to complete this venture. His felt presence gave us strength to successfully complete this study. A sincere word of gratitude for Dr. (Mrs.) Deepika R Kumar, Director Principal, Rayat Bahra College of Nursing, for providing facilities, support and guidance with which our research would only have remained a dream.

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