KNOWLEDGE & ATTITUDE REGARDING PCPNDT ACT AMONG PHARMACY STUDENTS: A STUDY CONDUCTED IN RURAL TEACHING INSTITUTE, KASEGAON.

Vasundhara Vijay Ghorpade¹, Madhekar N. S², Dabade K. J³, Bhumkar S. D⁴, Pol V⁵

HOW TO CITE THIS ARTICLE:

Vasundhara Vijay Ghorpade, Madhekar N. S, Dabade K. J, Bhumkar S. D, Pol V."Knowledge & Attitude Regarding PCPNDT Act among Pharmacy Students: A Study Conducted in Rural Teaching Institute, Kasegaon". Journal of Evolution of Medical and Dental Sciences 2014; Vol.3, Issue 74, December 29; Page: 15569-15574, DOI:10.14260/jemds/2014/4100

ABSTRACT: AIMS & OBJECTIVES: (1) To assess the awareness regarding PCPNDT Act & sex ratio, among students. (2) To Sensitize the Pharmacy students regarding declining sex ratio & create awareness by education. MATERIAL & METHODS: A cross-sectional opinion study was carried out in Rajaram Bapu Pharmacy College Kasegaon on 21st July 2014. In total 168 respondents participated with good response. A pretested & predesigned proforma was used to collect information under supervision & analyzed & interpreted with the help of percentage & chi square test. The sensitization was done with lecture & question answer session. **RESULTS:** Majority i.e.85.11 % were found in age bracket of 20 to 22 years with more female respondents. Almost i.e., 91.48 % aware about adverse sex ratio & PCPNDT Act. Commonest source of information was awarded to mass media (82.73%) more than half i.e. 58.92 % aware that sex determination is not permitted legally. Among them 27.97% exactly knew the punishment profile for violators. No girls to marry & rise in violence against women remained common future implication of female foeticide. Girls' attitude towards not going for sex determination found statistically significant compared with boys', $X^2 = 23.92$, df =2, HS. Common place of male/female discrimination for girls was outside home & institute, while for boys it was in institute. CONCLUSION: In our study though majority were aware about adverse sex ratio & PCPNDT Act, knowledge about exact punishment for violators seemed to be less. Most believed that, social & sexual crime & lack of brides will be the likely implications in future. Boys' attitude towards not going for sex determination in future was less compared with girls'. It urge for proper guidance sessions for them.

KEYWORDS: PCPNDT act, Sex ratio, Awareness, Female foeticide.

INTRODUCTION: It is a matter of grave concern that girl child continues to be insecure & vulnerable in Indian context. On other side goddesses like Durga, Saraswati, Laxmi have been worshiped since ancient period, but the practice of female infanticide is also there from centuries. With advent of new technology, suffering of female extended from womb to tomb. In this modern era, discrimination begins even before birth by using technologies to do selective abortions if found female fetus.

The census 2001 reported alarming sharp fall of sex ratio of children (0-6 year) from 962 (1981), 945 (1991) to 927 in 2001. Current 2011 figures are even worse i.e.914 per 1000 males. Categorically worst performing states are Haryana (830), Punjab (846), Delhi & Chandigarh (867), Rajasthan (883) & Gujarat (886).

Government of India enacted legislation in 1994 entitled Prenatal Diagnostic Techniques Act (PNDT Act) to regulate & prevent misuse of technologies for sex determination. The Act was implemented in 1996 & was amended in 2003 to Pre-conception and Pre-natal Diagnostic Techniques Act (PCPNDT) which provides prohibition of sex selection before & after conception. As

J of Evolution of Med and Dent Sci/ eISSN- 2278-4802, pISSN- 2278-4748/ Vol. 3/ Issue 74/Dec 29, 2014 Page 15569

on 30/9/2009, 36477 bodies registered using ultrasound in the country & 431 machines sealed with 603 on going cases in the court of law.

Mere enactment of Act is not enough. It needs involvement of people & serious efforts to implement legislation.³ Many mass awareness programmes have been started to highlight the adverse sex ratio & provision of the act. Sex ratio is an important social indicator measuring extent of prevailing equity between males & females in society. As today's college students will be tomorrow's parents, they must be involved in this fight against social evil. Considering the fact, the present study was planned to assess their knowledge & deliver the whole scenario by means of educational approach.

MATERIALS & METHODS: The present cross-sectional Institution based opinion study was carried out in Kasegaon Education Society's "Rajaram Bapu Patil pharmacy college "Kasegaon Tal. Walva Dist. Sangli. A informed written consent was obtained from Head of the Institution & purpose of study was explained to him. With the help of teachers from the same institute, a pretested & predesigned proforma was given to all the students with verbal permission from them. Those who were willing & present on the day i.e. on 21 July 2014 were the participants of study. In total 168 respondents participated with good response. In presence of Investigators & teachers, participants filled the proforma without permitting to discuss with each other. After filling of proforma, a lecture was delivered on the same for one & half hour & one hour dialog was done for likely questions from audience. Strict confidentiality maintained about collected data & interpreted & analyzed using appropriate statistical techniques.

RESULT:

Age	Male(%)	Female(%)	Total(%)
19	7(10.14)	6(6.06)	13(7.73)
20	8 (11.59)	31 (31.31)	39(23.21)
21	30 (43.47)	43(30.30)	73(43.45)
22	17(24.63)	14 (14.14)	31(18.45)
23	7(10.14)	5(5.05)	12(7.14)
Total 69(41.08)(100) 99 (58.92)(100) 168 (100)			
Table 1: Age & sex wise distribution of Respondents			

Age in completed years.

In present study, majority i.e. 85.11% belonged in the age bracket of 20 to 22 years. Females outnumbered the male respondents i.e. 58.92% & 41.08 % respectively.

Awareness	Boys (%)	Girls (%)	Total (%)
Yes	64 (92.75)	88(88.89)	152(91.48)
No	5(7.25)	11(11.11)	16(9.52)
Total	69 (100)	99(100)	168(100)
Table 2: Distribution of Respondents according to awareness about adverse sex ratio & PCPNDT Act			
X ² =0.7, df= 1, N.S.			

ORIGINAL ARTICLE

Above table shows that, 91.48% respondents were aware about adverse sex ratio & PCPNDT Act. The difference of awareness in boys & girls was not found to be statistically significant.

Source	Number (%)	
Family members & friends	13(7.73)	
Teachers	2 (1.19)	
Doctors	0(00.00)	
Media & internet	139 (82.73)	
Not answered	24 (14.28)	
Table 3: Source of Information about PCPNDT Act		

**Multiple responses

In Majority, response to source of Information was awarded to Mass media & Internet i.e. 82.73 %.

Awareness	Boys (%)	Girls (%)	Total(%)	
Yes	8(11.59)	14(14.14)	22(13.09)	
No	36(52.17)	63(63.63)	99(58.92)	
Don't Know	25(36.23)	22(22.22)	47(27.98)	
Total 69(100) 99 (100) 168 (100)				
Table 4: Distribution of Respondents according to awareness about legal permission of Sex detection				

About 58.92% respondents were aware that, prenatal sex determination is not legally permitted. Girls were more aware compared with boys i.e. 63.63 % & 52.17 % respectively.

Punishment	Boys (%)	Girls (%)	Total(%)
Fine	12(17.39)	13 (13.13)	25(14.88)
Imprisonment	5 (7.24)	11(11.11)	16(9.52)
Fine + Imprisonment	13(18.84)	34(34.34)	47(27.97)
Removal from Job	32 (46.37)	14(14.14)	46(27.38)
Don't know	7(10.14)	22 (22.22)	29 (17.26)
Total	69 (100)	99(100)	168(100)
Table 5: Awareness about type of punishment under PCPNDT Act			

Only 1/3 rd i.e. 47 (27.97%) were exactly aware about punishment under PCPNDT Act. Girls were more aware compared with boys i.e. 2.61:1.

Effects of Female Foetcide	Number (%)	
No girls for the Boys to marry.	131 (77.97)	
Increase in sexual & social crime against women	136 (80.95)	
No mothers & sisters in future	96 (57.14)	
Adverse effect on female health because of	42 (25)	
repeated pregnancies & forced abortions.	42 (23)	
Any other	6 (3.57)	
Don'tknow exactly	23 (13.69)	
Table 6: Impact of Female Foeticide on society		

[Any other – Inter caste marriages, polyandry etc.] **Multiple responses.

Major respondents i.e. 80.95% felt that, there will be increase in crime against women followed by, less number of girls to marry with boys (77.97 %). About 57.14% felt, no mothers & sisters will be there in future.

Prenatalsex	Boys	Girls	Total
Determination in future	(%)	(%)	(%)
Yes	21(30.45)	6 (6.06)	27 (16.07)
No	34 (49.27)	82 (82.82)	116 (69.05)
Can'tsay	14 (20.28)	11 (11.12)	25 (14.88)
Total	69 (100)	99(100)	168 (100)
Table 7: In future will you do prenatal sex determination?			

X²= 23.98, df = 2, H.S.

About 2/3 rd i.e. 69.05 % had positive attitude towards not doing sex determination in future. Girls outnumbered the boys, found to be statistically highly significant.

Discrimination	Boys (%)	Girls(%)	
At Home	2 (2.89)	14(14.14)	
At Institute	10 (14.49)	18 (18.18)	
In other Surroundings	5(7.25)	41(40.59)	
No	52 (75.36)	59 (59.59)	
Table 8: Distribution of Respondents ever encountered Male/Female discrimination at various places			

**Multiple responses.

About 59.59% girls & 75.36% boys never encountered male/female discrimination in life. Commonest place for discrimination for girls was outside the home & institute i.e. 40.59% while for boys the place was institute i.e. 14.49%.

ORIGINAL ARTICLE

DISCUSSION: In the present study, Pharmacy undergraduates participated with preponderance of female students were in agreement regarding adverse sex ratio and female foeticide (91.48%). These findings are comparable with studies done by Subita Patil et al⁴ - cross sectional study on medical students in Mumbai reported 98% of awareness and siddhu T K et al^{5,} while Dadwani Roma and Tintu Thomas⁶ reported 58% among general population. Mass media & internet remained commonest source of information regarding PCPNDT Act awareness. The finding is comparable to study done by S K Muralkar et al⁷ and Siddharam Metri et al⁸ reported 90% source as media while not comparable with Subita Patil et al⁴ ascribed to availability of free internet access to the students in the institute though having rural background. In our study, about 58.92% were aware that, it is not legally permitted which is less compared with S K Murarkar et al⁷ reported 79% in adolescent girls. Only 1/3rd i.e. 27.97% aware the correct punishment scenario in defaulters of PCPNDT Act, which is more compared with S K Murarkar et al⁷ reported 18.33 % among adolescent girls but less compared with Siddharam Metri et al⁸ reported 53% among teachers of Hassan district Karnataka. Present study focused increase in sexual & social crime against women as an impact of female foeticide in future followed by less number of girls to marry .i.e. 80.95% & 77.97 % comparable with a comparative study of urban & rural population by Dadwani et al⁶ reported lack of bride in future 76.5% from urbanites & 73.9 % from rural people while 43% response to increase in sexual & social crime from study done by Subita Patil et al.⁴ The findings are not comparable with study done by S K Murarkar et al^{7,} no girls to marry 6.4%, sexual crime 2%. About 2/3 rd i.e. 69.05% had positive attitude towards not doing sex determination in future. Girls attitude was good compared with boys which was statistically significant $x^2 = 23.92$, df = 2, H.S. About 59.59% girls & 75.36% boys never ever encountered male/female discrimination in life. Commonest place of discrimination for girls was outside home & Institute while for boys in Institute.

CONCLUSION: The study shows that almost i.e. 91.48 % respondents were aware of sex determination & female foeticide. Mass media & Internet remained commonest source for information regarding PCPNDT Act. More than half (58.92%) were aware about that sex determination is illegal but only 1/3rd were aware about exact punishment modalities for defaulters. About 80.95 % opinioned that crime against women will increase in future & there will be no girls to marry (77.97%). Girl's attitude towards not going for sex determination was more favorable than boys was found to be statistically significant. More than half i.e. 59.59% girls & 2/3rd boys i.e. 75.36 % never ever encountered sex discrimination in their life.

REFERENCES:

- 1. Office of Registar General & Census Commissioner, India, "Population in age group 0-6 years by sex & sex ratio (0-6) census of India: 2011" accessible at http:// censusindia.gov.in
- 2. J. Kishor. National Health programmes of India, Century publication 11th edition page no.832.
- 3. Shrivastav Shalini, Kariwal P, Kapilasrami MC "A Community based study on awareness & perception on gender discrimination & sex preference among married woman in a rural population of district Bareilly, Utter Pradesh". National journal of community Medicine 2011; 2(2): 273 276.

ORIGINAL ARTICLE

- 4. Subita Patil, Vijay Singh, Smita Chavan et al, "Knowledge & Attitude Regarding PCPNDT Act among medical undergraduates". Innovative journal of medical & Health Science 4:2 March-April (2014), 83-85.
- 5. Sidhu T K, Kumar S, Paramjit E, Kaur S. "A study of knowledge & attitude of medical undergraduates regarding prenatal sex determination & female foeticide". Ind. Jr .M.C.H. vol. 13(3), 2011.
- 6. Dadwani Roma S, Tintu Thomas. "Knowledge Regarding Sex-Ratio & PCPNDT Act". A Cross Sectional Study. International Jr. of Scientific Research vol.3 Issue-8, Aug.2014, 274-276.
- 7. S K Murarkar, M M Ghate, A M Joshi et al 'A study of Knowledge & attitude of adolescent girls in rural area regarding prenatal sex determination & female foeticide'. Indian Jr. of Maternal & child Health vol.15(4), 2013, 2-7.
- Siddharam S. Metri, Venktesh G.M., Thejeseari H.L., "Awareness Regarding Gender preferences & Female foeticide among teachers in Hassan District, South India, Journal of Clinical & Diagnostic Research, 2011 Nov.(suppl-2) vol -5 (7) 1430 - 1433.

AUTHORS:

- 1. Vasundhara Vijay Ghorpade.
- 2. Madhekar N. S.
- 3. Dabade K. J.
- 4. Bhumkar S. D.
- 5. Pol V.

PARTICULARS OF CONTRIBUTORS:

- 1. Associate Professor, Department of Community Medicine, Institute of Medical Sciences & Research, Mayani, M. S.
- 2. Professor and HOD, Department of Community Medicine, Institute of Medical Sciences & Research, Mayani, M. S.
- 3. Assistant Professor, Department of Community Medicine, Khaja Banda Nawaz Institute of Medical Sciences, Gulbarga, Karnataka.
- Assistant Professor, Department of Obstetrics and Gynaecology, Institute of Medical Sciences and Research, Mayani, M. S.

 Statistician-Cum-Assistant Professor, Department of Community Medicine, Institute of Medical Sciences and Research, Mayani, M. S.

NAME ADDRESS EMAIL ID OF THE CORRESPONDING AUTHOR:

Dr. Vasundhara Vijay Ghorpade, Shraddha Hospital, Kasegaon Tal-Walwa District, Sangli-415404, M. S. E-mail: drvijayghorpade@rediffmail.com

> Date of Submission: 22/12/2014. Date of Peer Review: 23/12/2014. Date of Acceptance: 24/12/2014. Date of Publishing: 27/12/2014.