Public Health Interventions to Stabilize the Asymmetrical Sex Ratio in India

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**Editorial**

Worldwide, the demographic indicators of any population have gained a lot of importance as it not only provides the desired information required for development of health policies, but even enables evaluation of the existing strategies and comparison of these indicators on a regional or global level[1]. Sex ratio (i.e. the total number of females per thousand males), plays a significant role not only in epidemiological studies, but also depicts the socioeconomic and cultural pattern prevalent in the society [2]. Estimates of the latest census in India suggest a negative trend in the child sex ratio (viz. 911 females per 1000 males in 2011 in contrast to 927 females per 1000 males in 2001), and it emphasizes that due attention should be given to halt this trend[3,4].

Research work has revealed the development of various genetic models to explore the dynamics of sex ratio[5]. Although, sex composition of a region is influenced by the heterogeneity in the mortality pattern of the population, & sex selective migration, nevertheless a wide gamut of determinants has been identified which contribute to the imbalance of the country’s sex ratio[1]. This includes factors like socio-cultural or religious beliefs or political opinion in shaping the attitude towards women in India (viz. preference for a boy is so deep rooted that women also prefer to have sons as giving birth to a son gives them social status and acceptance within the husband’s family; pregnant women are often pressured by their husbands and members of his family, sometimes including verbal and physical abuse, to undergo prenatal sex determination and to abort the fetus if it is a female[6,7]; demand for smaller families[8]; parents cognition[9]; history of recurrent miscarriages[10]; maternal migration [11]; poor awareness among health workers about indications of prenatal diagnostic techniques [2]; ineffective utilization of mass media to spread awareness[1,2]; preference for assisted reproductive techniques [12]; abuse of prenatal diagnostic technique [2]; practice of female feticide[6]; illegal abortions by doctors/untrained persons[6]; unethical practices by doctors[2]; loopholes in existing laws[13]; and ineffectiveness of the regulatory bodies to punish the offenders[6]. The impact of this skewed sex ratio (male-biased population) has shown significant influence on the incidence of crime as well as on the success of marriage[14].

In accordance with the achievement of Millennium Development Goal - 3 to promote gender equality and simultaneously ensure empowerment of women, the need of the hour is to develop a coordinated response involving all the stakeholders - policy makers, law enforcers, medical fraternity, media, non-governmental agencies, and the community itself[1,2]. This indirectly will negate the impact of a skewed sex ratio in the country as a whole, and thus a comprehensive strategy should be formulated to address all potential risk factors[2]. It should essentially consist of measures to create awareness among people through the use of media & behavior change communication strategies[1,2]; periodic sensitization sessions for the medical practitioners to curb the practice of sex identification, illegal abortion & feticide [6]; orientation of medical students regarding precise indications of prenatal diagnostic techniques[2]; development of guidelines to allow rationale usage of radiological tools [6]; creating a team of qualified professionals to supervise the use of radiological technology [2,6]; and quick & stern punishment of the guilty persons[6].

To conclude, it is high time that policy makers should realize the importance of sex ratio and thus give due attention to reverse the declining trend of the sex ratio so that further untoward consequences can be averted.

**References**