

ORIGINAL ARTICLE

**Perception and social attitude towards child adoption among doctors of a
Medical College in Kancheepuram**

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ABSTRACT

Background: To assess the perception and social attitude among doctors towards child adoption and to find out if there are any associated factors affecting them. **Methods:** A cross sectional study was undertaken of sample of 258 volunteers. It comprised of doctors who volunteered for the research. A pre tested semi structured questionnaire was used for collecting socio demographic data and questions pertaining to attitude and perception toward child adoption. Analysis was done using SPSS software. **Results:** Out of the 258 volunteers interviewed, there was a positive association between age and perception and attitude toward child adoption (Chi square value -0.00). Sex and marital status were also analysed but no association was found (Chi square is 0.108 for sex and 0.916 for marital status). **Conclusion:** From the study we could infer that age has a significant association with perception and attitude toward child adoption among doctors

Keywords: Perception, Doctors, Attitude Child adoption, Significant association.

Introduction

Child adoption is defined as the official transfer through the legal system of all the parental rights that a biological parent has to a child, along with an assumption by the adopting parents of all of the parental rights of the biological parents that are being terminated and are assumed in their entirety by the adoptive parents, including the responsibility for the care and supervision of the child, its nurturing and training, its physical and emotional and financial support.¹

Adoption is the act of legally placing a child with a parent or parents other than those to whom they were born. An adoption order has the effect of severing parental responsibilities and the rights of the original parent(s) and transferring those responsibilities and rights to the adoptive parent(s). Adoption can either be an open or a fully disclosed adoption. It allows identifying information to be communicated between adoptive and biological parents and perhaps, interaction between kin and the adopted person. The adoption can also be closed which bars all identifying information from being shared between the adoptive parents, biological kin, and the adoptee.² Today, infertility is the main reason parents seek to adopt children to whom they are not related. Other motivations for adoption could be a desire to provide a home to a homeless child, to gain a child of the other sex, advanced age and the possibility of genetic problems in the person's biological child.² The factors that necessitate the adoption of a child range from the mere fact of being childless to the desire to replace a dead child, to acquire a companion for an only child, to stabilize a marriage, to legitimate an illegitimate child, to sustain a particular line of descent, to rescue a child in an irreversible situation of abandonment, or to relieve parents who are unable to take care of their child.

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Hindu law is the only law which addresses an adopted child as being compeer to a natural child because of the belief that a son was indispensable for spiritual as well as material welfare of the family.³ Earlier, Hindu law allowed only male to be adopted and restrictions were imposed on Caste and Gotra. Under Hindu law, female child could not be adopted. Moreover, only the male had a right to adopt, and the dissent of his wife was immaterial. With the passage of time, such restrictions have changed. Gender biases have reduced to a great extent in today's modern society. At present, under modern Hindu law, every Hindu male or female has the capacity to make an adoption provided he or she has attained majority and are of sound mind. Mostly, all of these laws, rules and regulations have been itemized in the Hindu Adoptions and Maintenance Act of 1956.³

Adoption rates in India have always been low, but they have been dropping in the past few years: The government's Central Adoption Resource Authority (CARA) adoption statistics show that in 2010 there were 5,693 in-country adoptions, while in 2017-2018, there were only 3,276 in-country adoptions.³

The reason for such a decline is unexplained. Our society may have begun to devalue adoption as a means to gain a family. Hence, we need to understand the attitude and perception of adoption as interpreted by people.

A social attitude is defined as "a behaviour pattern, anticipatory set or tendency, predisposition to specific adjustment or more simply, a conditioned response to social stimuli"⁴. Social attitude towards child adoption can influence a person's outlook toward child adoption, especially in India social acceptability is important. Hence a positive social attitude is necessary to increase child adoption rates. Perception is defined as, "the way in which something is regarded, understood, or interpreted"⁵. Society's perception toward the adopted child must also be positive for the child to lead a respected and happy life in the society.

The current study focuses on the social attitude and perception of doctors, as they can counsel patients that are both parents and children in the right way. Insight into their perceptions may provide a clearer understanding of what action is needed to keep adoption a successful option and a positive experience for those who decide to adopt. Since our hospital serves several villages nearby, it is important to assess the social attitude and perception of these doctors to increase the adoption rate.

Methodology

A cross sectional study was undertaken on a sample of 258 volunteers calculated using previous study[1]. The study was conducted on doctors selected by simple random sampling working in a tertiary care hospital. All doctors willing to take part in the study were included. Doctors not willing to take part in the study or doctors who have adopted already were excluded from the study. Anonymity and confidentiality of respondents were maintained, and participation was voluntary. The study was done over a period of four months; this is from February 2021 to May 2021. A pre-tested questionnaire was used. The questionnaire had details about demographic data like age, gender, and religion, followed by questions to assess social attitude and perception. Score was allotted to each question based on the response. Perception and attitude were scored together. Ethics approval was provided by the institutional ethics committee for the survey. Statistical analysis was done using Microsoft excel and SPSS statistical package. Frequencies and percentages were used for descriptive statistics and chi-square, with p value <0.05 considered as significant, was used for inferential statistics.

Results

Samples of 258 volunteers were a part of the study. Mean age of the population was found to be 43.0 ± 5 . The age groups were distributed across a class interval of 10 i.e., the number of people in the age group 21-30 were 56 (21.7%), 31-40 were 31 (12%), 41-50 were 126 (48.8%), 51-60 were 36 (14%), 61-70 were 4 (1.6%), 71-80 were

2 (0.8%), 81-90 were 2 (0.8%), 91-100 were 1 (0.4%). Females (n=182) were found to outweigh the males (n=76) in the study. Majority of the population were married (79.8%) (Table-1)

In order to analyse perception and attitude for child adoption, each question was given a score- a positive response to the question was taken as 2, 'maybe' responses were scored as 1 and all negative responses were marked 0. Based on the answers the highest score can be 48 and the least score can be 0 (Table-2)

This was then divided into class intervals of 16. People with scores 0-16 have poor perception and attitude, 16-32 have average perception and attitude and 32-48 have a good perception and attitude. Based on this 34 people had average perception and attitude (13.2%) and 224 had good perception and attitude (86.8%). Age, sex, marital status had their own impact on the various domains and thus on the whole impacting the perception and attitude toward child adoption. This was studied by using chi square test. (Table-2)

Table-1: Socio-demographic details of the population (n=258)

Variables		No.	%
Age (in years)	21 to 30	56	21.7
	31 to 40	31	12.0
	41 to 50	126	48.8
	51 to 60	36	14.0
	61 to 70	4	1.6
	71 to 80	2	0.8
	81 to 90	2	0.8
	91 to 100	1	0.4
Sex	Female	182	70.5
	Male	76	29.5
Marital status	Married	206	79.8
	Unmarried	52	20.2
Scoring	16 to 32	34	13.2
	32 to 48	224	86.8

Table-2: Statistical analysis (n=258)

Variables		16-32	32-48	Total	P value
Association of age with perception and attitude (years)	21 to 30	11	45	56	0.000
	31 to 40	4	27	31	
	41 to 50	10	116	126	
	51 to 60	0	36	36	
	61 to 70	0	0	4	
	71 to 80	2	0	2	
	81 to 90	2	0	2	
	91 to 100	1	0	1	
Association of gender with perception and attitude	Female	20	162	182	0.108
	Male	14	62	76	
Marital status versus perception and attitude	Married	27	179	206	0.946
	Unmarried	7	45	52	

Discussion

A cross sectional study was conducted among doctors about their attitude and perception toward child adoption. Out of the 258 doctors that volunteered, the mean age of the population was 43.0 years. Females (n=182) were found to outnumber the males (n=76) in the study. Majority of the population were married (79.8%). It was found that 96.1% of doctors who participated in the study have heard about child adoption. In a similar study conducted in Nigeria about

perception of child adoption among parents/caregivers of children attending paediatric out patient department¹, it was found that 94.2% knew what child adoption was.

In this study 69.8% showed willingness to adopt which was lesser than to study conducted in Zaria about their attitude and perception to child adoption⁹ where 75% showed willingness to adopt a child. As per the scoring system, scores between 0-16 were considered poor, 16-32 were considered average and 32-48 were considered to have a good perception and attitude. Age, sex and marital status were associated using chi square to these scores on the perception and attitude towards child adoption.

It was found that age has significance with perception and attitude (Chi- square value- 0.00). Doctors in the age group 41-50 have the highest scores and doctors in the age group 61-70 have the least scores. Generally, ages 21-50 have a better score than those between 51-100. Among the age group 21-30, 11 have average score and 45 have a good score; 31-40, 4 have average score and 27 have good score; 31-40, 4 have average score and 27 have good score; 41-50, 10 have average score and 116 have good score; 51-60, 36 have good score; 61-70, 4 have average score; 71-80, 2 have average score; 81-90, 2 have average score; 91-100, 1 has an average score.

Meaning that young and middle-aged people have a better perception than the elderly. Every generation has a little more forward thinking and open mindedness to the previous generation. The most important factor that contributes to this is education. As awareness and knowledge increases the attitude and perception changes to become a positive one. The old proverb, "You can't teach an old dog new trick" is rightly said.

When gender was tried to be associated with perception and attitude of child adoption, no significance was found ($\chi^2 = 0.108$). In the population taken the number of females were more than males. 20 females had an average score and 162 females had a good score whereas 14 males had an average score and 62 males had a good score. Females and males even though are more or less equally willing to adopt, chances are that a couple together might not be able to agree on adoption together and hence decreasing child adoption rates. Adoption is not about finding children for families; it is about finding families for children. In a study conducted in Nigeria about child adoption being an option for management of infertility it was found that women from the inner core considered adoption as bad, as the last hope for the childless and that adoption does not remove the stigma of being barren or childless while the men from the inner group had some thought about adoption.

Lastly when marital status was attempted to be associated with perception and attitude towards child adoption, no significance was found ($\chi^2 = 0.946$). Married or unmarried people can both adopt. Marital status has no influence over the perception. Infertility is the major factors that might influence a married couple to adopt. As per the Adoption Regulations 2017 and in accordance with the Juvenile Justice (Care and Protection of Children) Act, 2015, issued by the Ministry of Women and Child Development:

1. The prospective adoptive parents (PAP) "should be physically, mentally and emotionally stable, financially capable and shall not have any life-threatening medical condition."
2. A person can adopt irrespective of their marital status and whether or not he or she has a biological son or daughter.
3. A single female can adopt a child of any gender but a single male shall not be eligible to adopt a girl child. In case of a married couple, both spouses should give their consent for adoption.
4. "No child shall be given in adoption to a couple unless they have at least two years of stable marital relationship," mention the regulations.

5. Couples with three or more children shall not be considered for adoption “except in case of special need children”, “hard to place children” and in case of “relative adoption and adoption by step-parent”.⁶

Conclusion

Continued advocacy and public enlightenment campaigns should be strengthened in order to harmonize adoption process in our setting. Increasing awareness and knowledge on child adoption will increase the attitude and perception on it. Conduction of camps and talking about it are ways which might help promote it. We need to note here that adoption is not an act of charity. It is about taking absolute care and responsibility of a child as you give them a home and a family, no different from that of a biological child.

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