

Childlessness: Social Pressure, Coping and the Complexities of Adoption in Rural Society

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Abstract: *Infertility has been steadily invading the rural Indian population, and some of the childless parents are going for adoption as a solution. This is a new development since it was relatively unheard of and unconventional, and there is hardly any study on the issue. The present study was undertaken due to the lack of research in the field. This exploration attempts to cut through various aspects like the agony and pain of childlessness, the coping mechanisms, the process of deciding between adoption, the social, economic and legal aspects involved in adoption and finally the insinuations, gossip and attitudes of family and community members towards adoptive parents.*

Keywords: Childlessness, infertility, adoption, social pressure, stigma, rural India.

Introduction

The Indian population shows quite an intriguing scenario in terms of infertility. Reports from the World Population Prospects Revision Report (2017) document a decrease in the fertility rate among the Indian population from 4.97 in 1975-80 to 2.3 in 2015-20. This report also highlights that this rate will further decline to 1.86 in 2045-50 and to 1.79 in 2095-2100. Studies (e.g., Lal, 2018) have shown that infertility rates among the urban Indian population are higher. Some of the statistics provided in this regard are quite alarming. Studies have shown that one out of six couples from urban settings suffers from infertility. From urbanisation and lifestyle choices to vehicular pollution and substance abuse to medical issues such as PCOS and endometriosis (Katole & Saoji, 2019: 337; Deshpande & Gupta, 2019: 287), various factors have been studied and identified as some of the root causes behind this abrupt rise in infertility.

Therefore, with this gradual rise of infertility in urban India and rural India also lagging not much behind, one would assume an increase in adoption

rates. Still, surprisingly, that is not the case. Research findings portray an opposite scenario of this assumption. Studies have shown that infertile couples in urban India are not very keen on adoption. Instead, most urban couples prefer using assisted and artificial reproductive technologies and consider adoption as their last resort (Sharma 2018; Kalra 2018). There is availability of as many as 8,667 children for adoption across the country, as per the report published by the Ministry of Women and Child Development of India in 2019, which substantiates the aforementioned fact (India Today, 2019).

The practice of adoption exists in India as an age-old tradition. In earlier times, those adoptions took place mostly within very close or consanguineal relatives, as traditional Indian families place a huge regard on the purity of the bloodline. Considering that aspect, most families view children at orphanages or institutions negatively because of their unknown caste and religious backgrounds or the lack of pure bloodline (Bharadwaj, 2003: 1867; Bhargava, 2005). Moreover, society also holds strict stigmas against unwed mothers, resulting in discriminatory attitudes towards adoption outside the family line (Bharadwaj, 2003: 1867). Practices of adoption from outside one's family line, on the contrary, are a much more recent phenomenon. There has been an upward trend in practices of adoption from outside the family line, especially in urban India. The number has increased from 3011 (in-country adoption) adoptions in 2015-16 to 4155 in 2024-25 (Government of India (GOI) (2026). Adoption Statistics India. Ministry of Women and Child Development Adoption Statistics India).

Besides the fact that there has always been a rural-urban divide, adoption practices in India further reveal many interesting aspects. Adoption statistics show that only 0.3% of the 20 million orphan children in India don't have biological parents and are either neglected or abandoned. However, despite the availability of a large number of orphan children and the rise in the number of infertile couples, the adoption rate in India is surprisingly very low. Another important aspect is that patriarchy has greatly influenced adoption practices. Preference is often given to a male child over a female child, even in the case of adoption, to maintain the bloodline of the family and also due to property issues (Ahmad, 1975: 181; Bharadwaj, 2003: 1867). The statistics provided by CARA show that the in-country adoption number has decreased from 5693 in 2010 to 3011 in 2015-16, but has increased to 4155 in 2024-25, whereas the inter-country adoption number remained more or less unchanged between 2010 and 2015-16, but it has dropped in 2024-25 (Adoption statistics in India). Researchers have identified multiple factors

for this decline, one important being that, in contrast to foreign couples, Indian couples have to go through myriad social and family problems. Before going forward with adoption, they have to assess whether a child can match their ethnicity, religion, and social and cultural environment. Moreover, sex, body colour, physical quality and health of the child make a huge impact on their decision (Menon, 2017: 194).

Despite all these normative constraints placed on child adoption, patriarchy, at the same time, poses a stigma against childless Indian women. The standing of a newlywed wife largely depends on her ability to procreate. At times, womanhood becomes synonymous with motherhood and these strong stigmas subject the woman to social isolation, discrimination, violence, domestic discord, and even in severe cases of property debarment (Unisa, 2000: 84). Researchers have unravelled that stigma always not necessarily take a crude, violent or overt nature, it ranges from a very elusive and fine manner of probing to extreme forms of exclusion from certain domains, sometimes resulting in self-regulated exclusion (Babu, 2024: 287). Family in general and society at large belittle couples who are unable to bear children after marriage (Anand, 1984: 34). Infertility and barrenness are considered a curse for the couple and often a dreaded condition, especially for women. Childlessness not only subjects a woman to discrimination but also increases the threats of divorce (Patel, 1994; Madan, 1976: 67). Moreover, the stigma of violence often encompasses both the male and the female, resulting in various discriminatory and stigmatised behaviours from society (Bharadwaj, 2000). There are several instances where society forbids childless women to participate in certain religious and cultural rites, they are considered as bad omen etc. (Babu, 2024: 287; Unisa et al., 2012: 21). It becomes such a dreaded experience for them that infertile or childless couples are sometimes unwilling to share their experiences with researchers either due to the attached stigma or because of the fear of being recognized or because the experience is itself so painful that narrating them triggers their pain further (Unisa et al., 2012: 21).

For these reasons, adoption remains among the least researched and meagrely conceptualised facets of contemporary Indian reality in contrast to studies done in the West, with a limited amount of research focusing on the rural Indian picture. It is under this context that the present study was undertaken to recognise and understand the perceptions related to childlessness and adoption in the rural population of West Bengal.

Methodology and study context

The present study has been conducted using a qualitative approach where the author has relied on purposive sampling to recruit participants. Given the sensitive nature of the study and as the study was done in a rural setting, the author had to rely on personal contacts to get in touch with respondents. However, despite relying upon purposive sampling, the author was extremely careful to avoid any bias that could influence the result. Tape recorders were used, and then the interviews were transcribed. The author recorded as much as the respondents shared, and at no point were the respondents further probed or given suggestions that could influence the responses. The interviews were conducted on a one-to-one basis. The research was approved by the Institutional Ethical and Internal Quality Assurance Cell (IQAC). In Addition to that, prior permission was taken from the participants about their willingness to participate in the study.

Before beginning the interviews, the purpose of the research was conveyed to the participants. The participants were informed on the first hand that the interviews were conducted as part of a study, and the results of the study would be published. Initially, a semi-structured questionnaire or interview question schedule was constructed, which served as the interview instrument. Then, consent was taken from the participants, and the questions were shown to them. Only after they were fully satisfied did the interview start. It was further detailed to the participants that anonymity would be maintained, and at any point in time during the study, if they were unwilling to continue or felt any discomfort, they could withdraw from the study.

The site of the study was identified. Cresswell's deductive approach was adopted to develop the semi-structured questionnaire (Cresswell, 2013). Previous research on childlessness and adoption worked as a guide for the preparation of the questionnaire. The questionnaire was divided into parts. PART I (Socio-Demographic Profile): This section focused on the background information of the couples. PART II (Details and reason for adoption): This part comprises questions on what the reasons for adoption were. PART III (How was the procedure of adoption taken forward): This portion involved questions regarding the adoption process, including the social, economic and legal aspects involved. PART IV (Perception of family and society towards adoption): This portion involved questions regarding family members' attitudes and reactions towards adoption and how society had reacted before and after adoption. Some of the sample questions are given below:

1. What were the reasons for your child's adoption?
2. Did you try any alternative methods before adoption?
3. Can you detail the procedure for adoption and how you did that?
4. What was the reaction of your family and society towards your decision to adopt?

To maintain the homogeneity of the sample, certain inclusion and exclusion criteria were adhered to. The inclusion criteria were 1) The couples had only 1 adopted child, 2) The present age of the adopted child will be within 2-4 years, 3) Couples were Bengali in ethnicity with Bangla language as their mother tongue, 4) The age of the adopted children at the time of adoption will be within 1-2 years, 5) For all couples the length/duration of marriage should not be more than 12 years, 6) All the couples were residing in the rural region of Hooghly district, West Bengal. Exclusion criteria included 1) Couples separated, divorced, remarried or living apart due to occupation. 2) If any one of the partners has deceased. The age group of the participants ranged from 28 to 40 years, and they belonged to the middle-income group. The detailed demographic information of the couples is provided in Table 1.

Table 1: Sociodemographic details of the participants

10	SES	Age of Male	Age of Female	Education Qualification of Males	Education Qualification of Females	Occupation of Males	Occupation of Females	No. of years married	Family type
Family 1	Middle	40	32	Graduate	Higher Secondary	Service	House Wife	12	Nuclear
Family 2	Middle	34	30	Graduate	Higher Secondary	Business	House Wife	9	Joint
Family 3	Middle	34	28	Graduate	Graduate	Service	Service	9	Nuclear
Family 6	Middle	40	32	Higher Secondary	Secondary	Service	House Wife	11	Joint
Family 10	Middle	38	30	Graduate	Higher Secondary	Service	House Wife	10	Nuclear
Family 13	Middle	35	29	Graduate	Higher Secondary	Service	House Wife	9	Joint
Family 14	Middle	38	30	Higher Secondary	Secondary	Business	House Wife	10	Joint
Family 17	Middle	36	29	Graduate	Graduate	Business	Service	9	Joint
Family 18	Middle	34	28	Graduate	Graduate	Business	House Wife	8	Joint
Family 19	M	38	30	Higher Secondary	Higher Secondary	Business	House Wife	9	Joint
Family 20	M	39	33	Graduate	Higher Secondary	Service	House Wife	11	Joint
Family 21	M	35	29	Graduate	Graduate	Service	Service	8	Nuclear
Family 24	M	40	32	Graduate	Higher Secondary	Business	House Wife	10	Joint
Family 30	M	37	28	Graduate	Graduate	Service	House Wife	9	Nuclear

Source: Field data

The researcher conducted face-to-face interviews to gain insight into the perception and experience of the participants. Although they were a couple, they weren't interviewed together. In some cases, only one partner consented to the interview, while the other partner refrained from the interview. The interview generally lasted for an hour. The date and time of the interviews were fixed after obtaining permission from the participants and were decided by consulting the participants. The researcher first introduced himself, and then the purpose of the study was elaborated to them.

Data saturation (a point at which no new evidence materialises from the data) (Nachinab et al., 2019) was fulfilled by the time 14 infertile couples were interviewed. As all the participants were Bengali, the language for communication during the interview was Bangla. The researcher's mother tongue was also Bengali, so language was not a hindrance during the interview process.

Data analysis

For data analysis, initially an inductive approach was adopted (where the researcher determines themes from the data) (Babbie, 2012), and after that, thematic analysis (where the researcher breaks down the transcribed data into common themes, which generates a comprehensible depiction of the entire data set) (Creswell, 2013; Nachinab et al., 2019: 1) was used. The interviews of the participants were recorded, and afterwards, each interview was transcribed by the author on that very day. After that, the author went through the transcribed data several times to familiarise themselves with the responses. Through this data familiarisation process, the author was able to recognise the common ideas and patterns present in the narratives of the participants. All the perceptions, ideas and experiences that were present in the narratives of the participants were assigned codes. Based on the interrelationship between the codes, they were arranged into broad categories, and from them, they were clubbed into themes. The final themes were decided upon after reconsideration of all the themes again and again.

Findings

(1) Infertility and Childlessness: The Perception, Attitude and Behaviour of the Childless Married Couples

In today's fast-moving and stressful life, the correlated issues of infertility and childlessness have become a major concern. Not all married couples

across the world absolutely crave parenthood and child-rearing experiences, but the scenario is quite different in a country like India, where married couples are tied to certain kinds of social norms. Nonetheless, there has been a stark difference in attitude towards childlessness even within urban and rural Indian settings. Pressure to have children is way more intense in more traditional settings. In rural India, infertility is often viewed as a personal or biological failure, where parenthood is closely tied to identity and social status. Being childless, whether by choice or due to infertility, often evokes feelings of inadequacy, worthlessness, or social isolation. In most cases, society judges or stigmatises childless couples, particularly women, usually viewing and labelling them as incomplete or failing to fulfil their expected roles. This perception can intensify internal pressures within the marriage, resulting in frustration, anxiety, or depression. The scenario in an urban setting under better educational exposure and progressive individualistic life choices is relatively different. Here, married couples aren't seen as lagging or failing to fulfil their respective social role despite being childless. Meanwhile, nobody could deny that the desire for parenthood exists within those sections, even in covert forms. And that creates emotional conflict for couples struggling with infertility. This compels them to seek medical, religious, or alternative solutions, including fertility treatments, adoption, or surrogacy, to fulfil the societal expectation of having children.

(2) The Anxiety and Ever-Lasting Wait

Usually, all married couples hope to become parents sooner rather than too late. Only a few restrain themselves based on their own choice. Hence, most of the married couples, enjoying an active conjugal life, wait patiently for a baby. Sometimes married couples wait for long periods, at times even more than three to four years, before they actually seek any required medical interventions. Needless to say, this wait becomes tormenting for those who are willing to become parents. The same has been echoed in the statements of one female and one male respondent, respectively.

"We were married for almost 6 years and didn't have a baby." (Family 19; Mother)

"My wife couldn't bear a child even after a lot of efforts." (Family - 21; Father)

Coping Mechanisms: Undergoing Prolonged and Expensive Medical Treatments, and Adoption

It has been observed that the behaviour of childless couples is influenced by both their internal desires and external pressures. In both instances, depending upon their belief and economic condition, the infertile childless couples start pursuing a range of medical treatments, right from consulting traditional healers to availing expensive in vitro fertilisation (IVF) procedures. As one of the female respondents of this study has pointed out;

“We were not becoming parents after trying a lot and were still trying out. We visited a lot of doctors and found other ways you would know better how, like that of test tube babies, etc.” (Family 10; Mother)

However, at times, nothing works out, not even the expensive medical treatment. Even that cannot guarantee what most of these infertile married couples are looking for. This certainly leads to a lot of frustration. Practically, this does not leave any other way in front of them. This is exactly what has been explained by one such childless father.

“We didn’t become parents for a long time, even after trying a lot. My wife used to get upset while looking at other kids calling for their mother. We tried a lot of specialists, but still no improvements; finally, we adopted my brother’s daughter.” (Family -20; Father)

It has been observed that when these advanced and expensive medical treatments fail to deliver their intended result, married couples often adopt certain magic-religious practices. It’s more out of hope than based on any conviction. This can be assumed from the following statements.

“We didn’t have a baby. We tried a lot of things- you name it: doctors, medicine, tips and even visited a lot of religious places; nothing was left to do.” (Family -24; Father)

The behaviour of the studied couples revealed that in most cases, adoption is their last option. Not that these couples trying to become biological parents are entirely unaware of the options for adoption, but the choices of adoption don’t come naturally. As both the husband and wife, who eventually went for adoption, reveal;

“We adopted our child from a relative on my side. So even after waiting for several years and trying a lot of times, we did not have a baby. In the end, we decided to adopt. (Family 1: Mother)

“We were trying to have a baby, and that time the idea of adoption didn’t cross my mind. I thought that there was time and we should try. We did aim to have our own child. (Family 1: Father)

Adoption becomes the only rational option for those who have already waited for a long time. The sentiment of the following statement can be heard among many other adoptive parents as well.

"We were trying for a long time to have a baby, but nothing happened. So, instead of wasting any more time, we thought of adoption. (Family -30; Mother)

(3) The Social, Economic and Other Contexts of Adoption

It has been seen that the phenomenon of adoption has taken place in different social contexts. The death of one of the biological parents is one of the prime causes. As can be found from the following cases;

"My husband's friend had a daughter, and when his daughter was around a year old, his wife passed away. To take care of the child, the father married again. Even though that marriage aimed to take care of the child, his second wife didn't care much for the child. Even when the child was almost two years old, the stepmother's treatment of her child remained the same." (Family 3: Mother)

"So, at that time, my sister gave birth to her youngest daughter. When the baby was seven or eight months old, my sister died in an accident; it was so horrible I can't say. She had two more daughters aged 7 & 4 years old. But the youngest one was the one who needed more care. My husband and I proposed the idea of adopting the baby so that at least she could be taken care of." (Family 19: Mother)

"A relative of ours died while giving birth to her child. The father remarried, but the new mother didn't like the child. What would be the age then, 7—8 months?" (Family 30: Mother)

To go along with the death of one of the biological parents, sometimes there have been cases where parents have refused to take their child. Although not very common, there have been a few such instances. The following two are examples;

"During that time, my sister-in-law was pregnant, and we got a phone call that her labour had started and she was rushed to the hospital. After hearing the news, I went there. On reaching there and looking at everyone's face, it was clear that some mishap had happened. My sister-in-law could not be saved, but the baby was alright. Things were worse as the father abandoned the baby and left. I called him a lot of times and even went out to find him. I found him at his home, refusing to bring that baby home. After trying a lot to convince him

that he is the only parent he has, he was not ready to hear anything. That is when my wife said that if he was interested in raising the baby, we would like to adopt.” (Family 24: Father)

“Once, we came to know that a couple in our village gave birth to twins, but they left one at the hospital. I don’t know why, but when the hospital staff came to their home, all of the village came to know about that. The couple didn’t want to take their other child; that’s when I thought of adopting that baby.” (Family 18: Mother)

“There was a family of six: father, mother and four children. The father was an alcoholic and used to beat up his wife and kids. One day, when my husband was returning from work, he saw that guy keeping his two-or three-month-old baby on the railway track. My husband immediately rescued the baby.” (Family 10: Mother)

Economic inadequacy is also another factor that has forced people to adopt children from an impoverished background. This can be found in the following cases;

“We adopted our child from a relative on my side. So even after waiting for several years and trying a lot of times, we did not have a baby. In the end, we decided to adopt. At that time, they had given birth to their youngest child but could not afford to raise the child due to their financial situation.” (Family -1; Mother)

My sister-in-law wasn’t very financially stable. They already had three children, and during that time, they gave birth to their fourth child. One day, my sister-in-law and her husband came to our house with their newborn and asked us whether we would adopt her, as it was financially inconvenient to raise another child. (Family -1; Father)

“One of our relatives already had two children, but when they had their third child, it was hard to raise another child as they didn’t have good financial conditions. I went there and discussed adopting their child, and with some resistance, they agreed.” (Family 21: Father)

Finally, hostility and inappropriate behaviour for child-rearing have been other crucial factors that expedited the process of adoption.

“My sister was married to a very toxic man, who often used to abuse her. So, that time when we were looking for adoption, my sister passed away months after her baby was born. Now, all of the grudges of this man came down upon the baby, like his drinking, abusing and physically abusing the baby. I couldn’t bear the thought of the Baby

getting harmed and convinced my husband to adopt the baby.” (Family 2: Mother)

(4) The Social Responsibilities and Legal Aspects of Adoption

The social and legal aspects of adoption are immensely important. It revolves around creating a new family structure and transferring parental responsibilities from a child’s biological parents to adoptive parents. The process is complex, both in terms of legal procedures and the social responsibilities that come with raising an adopted child. Therefore, understanding the social and legal commitment involving these two dimensions is essential for those considering adoption and for society as a whole to support adopted children’s well-being.

Nearly all the respondents have shown social awareness in regard to “child’s well-being”, “emotional support” and “openness towards the child’s background”. However, in most cases, the “social responsibility to facilitate the child’s smooth integration into the community” and the ethical considerations of making informed decisions that prioritise the child’s best interests, respecting the rights of the child’s biological parents, and understanding the lifelong implications of adoption seem to be lacking. One of the adopting parents even echoed an air of distrust towards a biological parent.

“Even after adoption, we have found her father(biological) sneaking around our house. One time when she was playing outside, he got hold of her and tried to take her; luckily, we caught him and logged a complaint. Nothing has happened since then in the last few months; we have to be extra careful for her.... After that, we legally adopted her because it could later create some problems. Biological father was not a very reliable one, and there was a chance that he could again come up and ask for money and create a nuisance.” (Family 2: Mother).

“.... After two or three years, we thought of adoption. Her sister had given birth to a child, and then we legally adopted the child at around four or five months of age. The problem was created by my sister-in-law after two years of adoption, when she wanted her child back, as we adopted the child legally before there was anything she could do. Later, we made a settlement by offering alimony.” (Family 13: Father).

Nonetheless, the situational awareness regarding legal procedures of adoption is not as firm as it would seem from the aforementioned cases.

The awareness regarding the legal procedures of adoption seems to be missing among most of the respondents who have either adopted or want to adopt. The following case perfectly sums up the sentiment among most of the parents who seem very reluctant to go through the legal process of adoption.

“As it was a police case, we had adopted the child legally. It was not that we had planned for adoption, but when we saw that the child was in a helpless state, we decided to adopt. (Family 10: Mother).”

Most of the adopting parents have preferred to adopt from within their own kindreds, where the legal procedure has nothing to do with such a criterion. This reluctance seems to have been fostered by their lack of access to orphanages or organisations that help childless parents with adoption. The following cases substantiate this;

No, we had not thought of any organisation to apply for adoption, as we didn't have any idea regarding that. We thought it would be best if it were within the family. We could know the lineage and the parents, and it could be easier to convince the family. (Family 2: Mother).

No, we had no idea about any organisation from which we could adopt. On the rural side, there is not so much of a trend of adoption, so there is very limited information. Also, we thought approaching the parents directly would be best. (Family 3: Mother).

No, we have not heard of any adoption organisation. We have heard of orphanages, but we couldn't find any in our village, and it takes a lot of time in such cases. Moreover, there we would have no clue about the child's family; here, at least, we know it from our relatives. (Family 6: Mother).

(5) Insinuations, Gossip and the Negative Attitude towards Adopting Parents

Adopting parents often face societal pressures and biases that manifest as insinuations, gossip, and negative attitudes. These reactions stem from deeply rooted societal expectations around biological parenthood, misconceptions about adoption, and stigmas around infertility or childlessness. This negative social environment can create significant emotional and psychological stress for adoptive families, affecting their experience of parenthood and impacting the well-being of adopted children. It is seen that couples, when struggling with childlessness, often face negative and discriminatory behaviour from their own family members. The following two cases sum this up;

"We were, or should I say she was, judged by my family for her being sick and was mostly avoided." (Family 13; Father).

"I was not able to have a baby. My sister-in-law always used to blame me for that. After adoption, my in-laws were hostile towards me and later on things turned out to be normal." (Family -14; Mother)

In most cases, women are often blamed for childlessness, hence they face discriminatory behaviour.

"Due to this, the situation in our house changed, where my in-laws wanted my husband to remarry, as I could not provide next of kin. When my son died, I was 25. Later, when I was about to be kicked out of my house by my in-laws. I had a mental breakdown, was kind of depressed, and didn't use to talk to anybody. Fortunately, during that time, my husband stayed by my side and helped me through my bad days." (Family 18: Mother).

Only very rarely does one get to see an empathetic standpoint adopted by the family members.

"I got married at the age of 34. My wife had a medical problem where her uterine wall had a cyst formation. Hence, she was not able to conceive, so we decided to adopt. That time, we came to know about a baby we could adopt, here in our nearest village. We went there and talked with them, and it was only a matter of time before adoption. My wife used to be a working woman, and she lacked household skills. Back then, it was not easy for her to raise a child. After adoption, my family members were of great help and over time she learnt everything." (Family 17; Father).

The adopting parents also face a lot of harsh comments, even outside their household, from society at large. Adoptive parents frequently encounter insinuations about their decision to adopt, often framed through intrusive questions and comments. Questions like "Why didn't you try harder to have your own?" or "Do you know the child's real background?" imply that adoption is a lesser form of parenthood or an option chosen out of desperation. This questioning undermines the legitimacy of adoptive families, as though biological parenthood is inherently superior. Such insinuations can lead adoptive parents to feel defensive about their choice or insecure about their role. The following cases reflect that;

“Adoption is not common in our village, and people around here are not happy with that. Initially, they used to make comments at us; now, they also treat our child somewhat negatively.” (Family 6: Mother).

“We did face problems before, as I was always humiliated as infertile, and my husband also faced some cold comments.” (Family 18: Mother).

Gossip surrounding adoption often includes hurtful speculation about the child’s origins, parental abilities, or reasons behind the adoption. Rumours may circulate about the circumstances of the child’s birth or potential “problems” the child might face due to being adopted, such as behaviour or identity issues. This kind of gossip not only affects the parents but also exposes the child to scrutiny, creating a negative social environment that can impact the child’s self-esteem and sense of belonging.

Society’s bias toward biological parenthood often leads to negative attitudes towards adoptive parents. People may express or imply that adoptive parents are “settling” or making a “second-best” choice. This attitude is particularly present in cultures where bloodlines and genetic inheritance are highly valued. Adoptive parents may feel looked down upon or pitied, with others assuming they are adopting due to infertility or other difficulties, even if adoption was their preferred choice.

Discussion

In India, a predominant culture that cuts across different religious, social and cultural groups is the idea of motherhood that is embedded in the minds of young girls right from early childhood. The socialisation of the motherhood idea in India happens at all levels, from play to urging to take care, giving roles, etc., and the reproductive role of women is one of the most stressed upon and celebrated in this culture (Memon 2017: 194). Findings of this reveal that the married childless couples in the rural population in West Bengal show a general trend to wait for a baby for more than three or four years before going for any medical intervention. This waiting is generally coupled with anxiety and agony, which especially aggravates seeing other children and other couples having babies. Only after waiting for a considerable period of time, couples turn towards medical treatment and start visiting doctors as a coping mechanism. In many cases, it is observed that as the participants were from a rural background, they couldn’t very well articulate the artificial or assisted procedures they just mentioned- test tube babies- to make the researcher understand that they were talking about Artificial reproductive technology. Adoption was considered as the last resort only when all the above-mentioned procedures were exhausted.

Some participants have also mentioned that since there is still time, they can wait for some more time before they decide to go for child adoption. This is in line with the findings of previous studies wherein couples think adoption as an option only when all other treatments have failed (Jejeebhoy, 1998: 15; Unisa et al., 2012: 21; Gangopadhyay and Mathur, 2021: 1). Findings of this study also showed that rural couples not only undergo treatment but in their expectation of having a child they also adopted magic-religious practices like visiting religious places and doing rituals. It's really interesting to find similar evidence in the case of urban couples in India, wherein the females had been suggested to visit temples and keep fasts to conceive (Gangopadhyay & Mathur, 2021: 1).

Moving on to the social and economic aspects of adoption, findings of this study show that adoption took place where there was the death of one of the biological parents (in most cases, the mother) or where, after the death of the mother, the father went for remarriage, and the child was neglected or badly treated by the stepmother. In some cases, after the death of the mother, the larger family didn't want to accept the child or wanted to abandon the child. Also, the tendency to use substances like alcohol/drug, especially by the father, causes abandonment of the child. Another aspect which is noticed in the rural community is that biological parents often give their child up for adoption because of economic reasons, as many participants reported that their relatives were not financially stable and hence couldn't support so many children, so they wanted to give their child up for adoption. There are some cases where the child was given up for adoption due to hostile or inappropriate child-rearing behaviour on the part of their families.

Looking into the social responsibilities and legal aspects of adoption, the findings of the study reveal that almost all the rural childless couples were aware of the child's well-being, emotional support and being open to the child's background. In some cases, it's seen that even after adoption procedures, there was a tendency in the biological parent to demand the child back or ask for money for the child. It is evident from this that there is a lack of awareness regarding legal procedures or a tendency to delay in mitigating procedures related to adoption among rural couples who have adopted. Moreover, there seems to be reluctance in some couples to go through the legal procedures. All of which sometimes results in disturbances being caused by the biological parent and their family, which again had to be settled by providing alimony to them. An area that is of interest was that rural couples preferred to adopt within their kin; they had even elaborated on this, that adopting within family circuits or between close groups would

release them from legal procedures; also, they would know the child's lineage and their parents, which would be easier for them to convince their families. In a study done by Gangopadhyay and Mathur in 2021 which examined lived experiences of Infertility and Perceptions Toward the Adoption of Children in Urban India, shows that caste and family lineage identity continues to be regarded as an important criterion for child adoption (Gangopadhyay and Mathur 2021: 1). Child adoption within kin may be due to the inherent fear of adopting a child from an unknown background which is equally reflected by the study done by Unissa in rural Andhra Pradesh. Heredity of the child was also considered as an important factor because the emotional satisfaction or the connection in adopting the child from the kin is considered greater (Unissa et al., 2012: 21). Rural couples also reported that in a rural scenario, there is a lack of availability or awareness about orphanages and organisations, which might again be a cause for adopting within the kin. Participants with knowledge about orphanages mentioned that there is a lengthy adoption procedure involved, which is a cause of their reluctance. Similar perceptions have been observed among urban respondents in India who have reported adoption through organisations to be too much of a hassle, involving too many bureaucratic procedures (Gangopadhyay and Mathur, 2021: 1).

The last segment delves into the insinuations, gossip and negative attitude of family and community towards childless couples. Findings of this study reveal negative, discriminatory attitudes and reactions by family members as well as the community. It's seen that a childless woman is subject to blame, avoidance, ill treatment and hostility by family members, with threats of being driven away from home and of arranging a second marriage for her husband, which creates a great deal of psychological stress and trauma in the person. Many participants have shared that in rural settings, adoption is still not a common phenomenon, so people are not happy and accepting of their decision, and both the couple and the child have to face negative comments, which generally range from inquiries about the child's lineage to humiliating the couple about being childless to negative behaviour towards the adopted child itself. Generally, the gossip centres on the child's origin and the inability of the couple to produce a biological child, which directly poses questions about their fertility. Previous studies have showcased a similar picture where, at the community level, childless women face harsh, critical comments and ridicule, thereby compelling them to become socially isolated; they even avoid social occasions for fear of being criticised (Jejeebhoy, 1998: 15; Ganguly & Unisa, 2010: 131; Adamson et al., 2011: 440). The deep-rooted patriarchal beliefs that are held by family, community

and even by women have always associated childlessness and infertility with women. In line with our findings, there have also been studies which have upheld the trauma and stigma faced by childless women (Visaria & Visaria, 1994:17; Jejeebhoy, 1998: 15; Ganguly & Unisa, 2010: 131; Adamson et al., 2011: 440). In a classic study by Bharadwaj in 2003, he showed that society perceives adoption as the most problematic aspect of fertility. It is like a public statement of failed fertility and views the adopted child as a “third party” who has broken the link between the body and the progeny (Bharadwaj, 2003:1867). Moreover, previous studies have documented that, in adoption, as the child is integrated into the family in a publicly visible manner without any physical connectedness with the family, it makes the child/couple subject to ridicule and stigma that sometimes is considered by the couples far worse than infertility (Bharadwaj, 2003). Similar findings are found in a study by Nachinab et al., among women in northern Ghana, where the respondents mentioned that adopting a child is a sign of accepting defeat (Nachinab et al., 2019: 1).

Amidst all these findings, there is a silver lining that has come up in this study: a few participants have reported their husbands to be proactive in the case of child adoption, and it's their husbands who have initiated discussions and convinced them towards child adoption. Some of the studies done in other countries e.g. a study done in northern Ghana investigating perceived barriers of child adoption among women with infertility showed negative reaction of husbands towards child adoption, on the contrary they preferred marrying a second wife (Nachinab et al., 2019: 1). On the other hand, previous study done in Indian context e.g. a survey study done by Joshi, Prasad and Kushwaha among infertile couples in Pune on urban participants showed an optimistic picture revealing more willingness of husbands to adopt than wives (Joshi 2015: 318). These findings mark a tremendous shift in the perception towards child adoption, even in the rural Indian population.

Conclusion

The findings of this study suggest that rural childless couples strongly prefer medical intervention over child adoption. Even if they decide on child adoption, adopting within the kin is the only option. Reasons for this may be a lack of family or community support towards adoption in general, and strict stigma attached to adoption from unknown families, as well as a lack

of knowledge and awareness regarding government organisations and the lengthy legal procedures involved in adoption.

Based on these findings, the present study considers awareness regarding child adoption to be pivotal in rural India. Initiatives should be taken by the state to make people aware of the government organisations for adoption. The state should strive to make people understand the legal processes involved in adoption, which are often disregarded by rural couples.

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