

The ethics of sex selection

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The thought of women having abortions in order to choose the sex of their future children fills many with revulsion. To think clearly about this issue, it is necessary to separate arguments about the ethics of sex determination (SD) from those pertaining to abortion. People who find abortion ethically problematic will want to see its incidence reduced. We must contemplate SD carried out by preconceptional means rather than abortion following prenatal diagnosis as it is only a matter of time before techniques of sperm separation are perfected.

The premise of this article is that whilst sex determination is not a desirable practice, prohibiting it by law is likely to do more harm than good. This conclusion is clearly consequentialist - the only form of ethical argument that is plausible in this context. It is hard to provide persuasive reasons why SD is intrinsically unethical. No rights are violated when SD is allowed by law. Legal prohibition of SD will infringe upon the reproductive rights of women.

The consequences of legally permitting or prohibiting SD are bound to vary from one society to another. This analysis is limited to India and China, where SD is widespread and consequences are more palpable than in North America. In these two countries, the methods currently used are **postconceptional** and abortion is legal, without the religious and ethical abhorrence common among Christians, orthodox Jews and most Muslims. SD will probably never reach the proportion in the United States that it already has in these two Asian countries because the factors contributing to a strong preference for sons, so prevalent there, are absent here.

Preference for sons in India and China

In India, where abortion for the purpose of SD is widespread and shows no sign of waning, opponents refer to the practice as female feticide or femicide.^{1,1a} A strong feminist movement in India condemns SD. The Forum Against Sex Determination and Sex **Preselection** has engaged in political activism to promote a legal ban. In May 1988, largely as a result of the work of this group, **legislation** was passed in Maharashtra banning the use of medical techniques for prenatal diagnosis except in cases where the mother is at high risk of foetal abnormality.² In 1994, the Indian Parliament passed a law that provides penalties of three years in prison and a fine of about \$320 for those found guilty of administering or taking prenatal tests for the sole purpose of determining the sex of 'the foetus'.³

The social and cultural basis for preference for sons in

India and China is long standing and deeply entrenched. Religious traditions and economic circumstances drive the preference for sons beyond that in most other countries. In both India and China, the family name is passed down through sons, who are also financially responsible for supporting their parents in old age. In India, a precept of the Hindu religion holds that a **sonless** father cannot achieve salvation and a significant Hindu funeral rite for their fathers can only be performed by male children. An analogous tradition in China stems from ancient Confucian precepts that require a son to perform ancestral worship ceremonies.

The most striking determinant of son preference in India is probably the dowry system. According to one account: In the last two decades, fueled by a consumer boom among the new Indian middle class, dowry has spread like an epidemic to communities that never practiced it before. And its purpose has changed. No longer is it seen as a collection of wedding gifts to help a couple start a new life; instead, it is a way for the groom's family to elevate its economic **status**.⁴

These demands continue even after marriage. The consequences of failure to meet them can include ejection of the woman from the marriage and even murder by her husband's family?

Economic factors evidently provide a major incentive for aborting female foetuses but the underlying cultural tradition of preference for a son remains a strong factor. A middle class Indian woman, pregnant with her third child, underwent prenatal diagnosis for the purpose of sex selection. She already had two daughters and planned to abort if the foetus was another female. The family was reasonably well off and could afford another girl. They loved their daughters. The motivating factor was the social attitude. The woman told an interviewer: "Our society makes you feel so bad if you don't have a son... People say, 'How many children?' and I say, 'Two girls', and they say, 'Oh, too bad, no boy.' And I feel very bad." Interestingly, this Indian woman and her husband were Roman Catholics. She said, "Being a Catholic, it's the only sin I commit." But she added, "When this test is here and everybody is doing it, why shouldn't we have what we want?"⁶

In China, ancient Confucian ideology continues to influence the strong preference for a son, especially as the first-born child. In addition to the need for sons to maintain the family line and to perform crucial ancestral rituals, males are held to be smarter and stronger than females. Despite a law in modern China dictating that parental support is the duty of all children, males are still held responsible for the support of parents in old age. Women are not available for the care of their own elderly parents once they are married. Their

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productive and reproductive labours benefit their husband's families.⁷

Arguments opposing Sex Determination

The leading arguments in opposition to SD are: (1) the practice devalues the female sex; (2) it reinforces current attitudes and practices that discriminate against girl children and women; and (3) it results in an imbalance in the sex ratio. Each of these will be examined in turn.

Devaluing the female sex: Although it is no doubt true that a practice reinforcing the already existing preference for a son devalues the female sex, the question remains whether that is a sufficiently strong reason to institute legal prohibition. Who, if anyone, is harmed or wronged by the practice of SD? Surely not the female child who will not be born as a result of SD, since this is the child who does not now and will never exist. What about existing female children and women? Does SD harm or wrong them? This is where the debate begins and empirical evidence is needed to supply answers.

Some argue that women as a class are demeaned by a practice that seeks to avoid the birth of females. This avoids the critical question whether girls and women are made worse off as a consequence of this practice than they are anyway or than they would be if SD were eliminated. The first possible consequence to consider is female infanticide.

A report published in June 1986 in *India Today* estimated that six thousand female babies had been poisoned to death during the preceding decade in the district surrounding the town of Madurai in Tamil Nadu.⁸ Methods of infanticide include feeding the baby the sticky white milk of a poisonous plant or cow's milk mixed with sleeping pills.⁹ One mother of a day-old baby who had been killed thus was reported as saying: "We felt very bad... But at the same time, suppose she had lived? It was better to save her from a lifetime of suffering."¹⁰ The mother of another couple who had their second daughter killed said: "Abortion is costly... And you have to rest at home. So instead of spending money and losing income, we prefer to deliver the child and kill it."¹¹ Infanticide is viewed as an alternative to aborting female foetuses, and in the case of the second woman quoted, appeared to be the preferable alternative. It is not clear whether legal prohibition of SD produces an increase in the number of girl babies being killed after birth. Yet it is undeniable that from any ethical perspective other than an extreme right-to-life persuasion, aborting pre-viable foetus is ethically preferable to killing full-term infants after birth.

A second, well-documented consequence for girl children in poor families is their being neglected in favour of their male siblings. Whether SD is legally allowed or legally prohibited, girl children are often denied adequate food and medical treatment in favour of their brothers. So if a family has one or more girl children and then uses SD to produce a male child, it is likely

that the girls in that family will be harmed by inadequate food or medical attention. But the same consequences would result if a boy is born into the family without the assistance of SD. It is difficult to determine whether the practice of SD produces more harm to identifiable girl children than they would suffer in the absence of the practice. Nevertheless, it is clear that when SD is practiced, the total number of girl children who can be harmed in this way is decreased.

Some of the consequences for women of legal prohibition in India have already become evident. Women for whom SD is less readily available as a result of its being outlawed are made worse off because (a) they have more children than they want or than is healthy for them until they have the desired number of sons; (b) some will go to private doctors who perform SD despite legal prohibition and the procedure will cost considerably more than when it was performed in public hospitals before the prohibition; (c) those who do not bear sons risk having their husbands leave them without any means of support. Even affluent Indian families desire sons. Women in these families are threatened with divorce if they produce only female children. Following a divorce all property belongs to the husband, so these women may be left destitute.

The fact that the practice of SD contributes to devaluing the female sex is a good reason for judging it to be undesirable, but not a sufficient reason for legal prohibition. If women and their girl children in India and China are made worse off in other ways as a result of prohibiting SD than they would be if the practice is legally tolerated, an assessment of these consequences leads to the conclusion that SD should not be banned by law.

Reinforcing Discriminatory Attitudes: The second general argument opposing SD is that it reinforces current attitudes and practices that discriminate against girls and women. Evidence from Maharashtra, the Indian state that has had a legal prohibition of SD since 1988, suggests that prohibiting SD has not changed the preference for sons nor has it done anything to enhance the position of women. Although it is surely desirable to increase respect for women and try to improve their status, there is little evidence that prohibition of SD does or will have those desired consequences. According to Madhu Kishwar, a fellow of the Study of Developing Societies in Delhi: "[S]tatistical measures such as banning the test and punishing those who go for it, are likely to be both ineffective and counterproductive. Female foeticide is a symptom of devaluation of female lives. Unless we are able to deal with all those social and economic factors that are going into the culture of son-preference and daughter-aversion, we cannot effectively combat the killing of unwanted female foetuses."¹²

Of course, it is not evident how these cultural attitudes can

be changed. Professor Kusum, a scholar at the Indian Law Institute in New Delhi contends that laws banning SD will not change the attitudes of the Indian people toward women. Instead, efforts must be made to try to change such attitudes by education rather than by law.³

Thus, although it may well be true that SD reinforces current attitudes and practices that discriminate against girls and women, the converse does not appear to be true: prohibiting SD does not have the effect of eliminating attitudes and practices that discriminate against members of female sex. Furthermore, legal prohibition in India does not seem to have succeeded in lowering the number of SD tests.¹⁴ The practice has simply been driven underground, with no way of monitoring the numbers or seeking to maintain quality control. After the ban, doctors who do the procedure have become unwilling to talk or provide information?

A physician in Bombay who formerly practiced SD contends that enacting the law in Maharashtra has played into the hands of unethical people. Physicians who do amniocentesis sometimes do it unscrupulously, telling women that the foetus is a girl when it is not. Financial motivation conjoined with legal prohibition has worsened the situation. The doctor in Bombay stated his own belief: "You can't violate the law of the land." He says that it was wrong to enact the law, but now that it's there, it must be respected?

In China, the return in the 1980s to family-based labour has led to the rise of patriarchal authority and discrimination against women. The immediate effect of this radically altered economic policy in a formerly centralised economy has been the desire or need for children, especially sons, to provide hands for work. Sons are thought to be better workers than daughters, and the demand for more children becomes a demand for sons.¹⁷ Conjoined with the state policy of one-child family, the ultimate result has been a reinforcement of the traditional preference for sons. SD following prenatal diagnosis is therefore the consequence, not the cause of discriminatory attitude and practices.

If the practice of SD reinforces current attitudes and practices that discriminate against girls and women, that is a good reason for judging it to be undesirable but not a sufficient reason for legal prohibition. It is hard to see how further restricting the options for women who already have limited choices in their lives can benefit them.

The danger of an imbalance in the sex ratio: Demographic figures from both countries reveal that a significant imbalance in the sex ratio has already occurred. In China, the 1990 census showed that of a total population of 1.2 billion, about 205 million Chinese over the age of 15 are single. Of those, there are nearly 3 men for every 2 women. Among people in

their 30s, men outnumbered women by nearly 10 to 1.¹⁸

In India the ratio of men to women in the population which has been widening throughout the century, has been tipping even more sharply toward men. Census counts show a trend: from 971 females for every 1000 males in 1901, to 930 in 1971, and 929 in 1991.¹⁹ In Haryana, a populous northern state that surrounds Delhi, the figure in 1991 dipped to 874 females for every 1000 men, a disproportion said to be virtually unprecedented in similar counts around the world.²⁰ Yet some have argued that the prenatal tests for SD cannot be viewed as primarily responsible for the growing imbalance in the sex ratio. That ratio continued to decline sharply in the period between 1901 and 1971, when there were no tests, and between 1971 and 1991. The number dropped by only one point (930 in 1971 and 929 in 1991).²¹

As Jonathan Glover notes: "To refer to an imbalance between the sexes as a 'danger' may seem to beg a question. The traditional pattern is of a roughly equal number of men and women in any generation. Is it so clear that to depart from this would be disastrous?"²² The answer, once again, can only lie in an assessment of the actual or probable consequences of an imbalance in the sex ratio. Some recent evidence has begun to emerge in China but at present such assessments are more speculative than based on empirical evidence.

Glover speculates that if two-thirds of a generation were male, a real problem could result. Men would feel that they are at a substantial disadvantage since many of them would be deprived of a partner. This, in turn, could result in a growth in prostitution and pressures towards polyandry.²³ Kusum notes a similar fear about polyandry and adds to that the prospect of an increase in crimes like rape, incest and kidnapping. She also mentions the fear that "the reproductive burden on women will increase because the same burden of bringing forth progeny will then have to be shared by fewer women."²⁴

Are there any possible positive consequences? One argument would be that an imbalanced sex ratio would ultimately benefit women. As women become scarcer, their value would increase. Women would then become valued in the way that rare jewels or one-of-a-kind art objects are revered. Glover rejects this argument on the grounds that it "depends on an excessively 'economic' view of relationships and of why people are valued...The argument is essentially that scarcity drives up the value of any commodity. But people are not commodities, and so the benefit to women from the imbalance is at least highly speculative."²⁵

The presumed negative and positive scenarios resulting from an imbalance in sex ratio are potential rather than actual consequences. The trouble with consequentialist arguments is that they rely on projections or assumptions, that

they tend to stress those consequences that fit their authors' value predilections. Fortunately (or unfortunately), there is some reported experience from China.

One lonely 30 year old man lamented that "women are so hard to find now, and I just want one."²⁶ A government sponsored computer dating service in Beijing reports that at least 70 percent of the young people who come for the service are men. A social worker at the service observed that women have a good chance of finding a man who meets their standards, while men who ask for beautiful girls are told they must be realistic. Young men are reported to be dejected and pessimistic about their prospects. A 22 year old engineering student despaired of ever finding a mate, while his friend speculated that "Without enough women, may be we will become monks."²⁷

One rather cynical conclusion that might be drawn from these figures is that in these traditional, male dominated societies, men are finally getting what they deserve. A more favourable outlook is one that envisages the benefits to women. Glover's rejection of people as commodities notwithstanding, a *New York Times* editorial cited market forces as a factor that has led to a new and higher value being placed on women. As a result of the current predominance of men, "suddenly young women are finding themselves valued in the society that once shunned them. They are being treated with new respect, and... have been rescued from disdain and oblivion by a highly impersonal and newly potent principle in Chinese life: market forces."²⁸ Guo Daofu, a senior economist for the State Statistical Bureau speculated that the current shortage of women will play a positive role in improving the status of women: "I think this will lead to changes in society. Men will have to become more open-minded."²⁹ This prediction, though is more speculative than it is based on any empirical evidence.

A darker picture is painted by Wang Wei, a professor of ethics at the People's University in Beijing, who noted a series of kidnappings of city women who were abducted by bounty hunters and delivered to rural farmers who were desperate for brides. "You could see more of that/Professor Wang said.

Conclusion

SD is an undesirable practice for the reasons stated by its opponents. Yet legal prohibition would restrict reproductive rights, hardly a desirable feature in countries like India and China that have both experienced serious violations of the rights of women by forced sterilisation and administration of state imposed long term contraception. Moreover, as already demonstrated in India, legal prohibition is likely to produce more harm than benefit to women and girl children in societies with strong preference for sons.

This conclusion must be tempered by the potential negative consequences of a severe imbalance in the sex ratio, as is already occurring in India and China. In both countries, social reforms rather than prohibition of SD are more likely to achieve desirable effects. Efforts should be made in all societies to increase respect for women and to enhance their status. An additional step in India is reform of dowry system, which not only commodifies the marital arrangement but also oppresses the parents of girl children. In the end, it is social and cultural change, not legal prohibition, that can enhance the position of women in traditional societies.

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