



SEX-SELECTIVE ABORTION IN INDIA

POPULATION RESEARCH INSTITUTE

WHAT IS SEX-SELECTIVE ABORTION?

Sex-selective abortion is the abortion of a preborn child simply because the child's sex was not what the parents wanted.

In countries where culturally-rooted son preference is common, sex-selective abortion is used as a means to attain a couple's desired number of sons and desired family composition. Sex-selective abortion constitutes violence against women and is a serious violation of the fundamental rights and equal dignity of women.

WHAT IS SEX SELECTION?

Sex selection is the elimination of unwanted daughters (or sons) through preconceptional, prenatal, or postnatal means. Preconceptional means of sex selection include selective in vitro fertilization (IVF) methods including sperm sorting. Prenatal means include sex-selective abortion and destruction of female embryos conceived through IVF. Postnatal sex selection includes female infanticide or neglect. Due to cultural biases against women, parents often give daughters lower priority than sons when allocating food, immunization, or providing access to health care. As a result, girls in many patriarchal societies suffer disproportionately higher mortality rates than they would if gender bias did not exist.



WHAT ARE SEX RATIOS?

A sex ratio represents the number of males to females in a population. A sex ratio at birth represents the number of males to females at birth. In most countries, the sex ratio at birth ranges between 103-107 boys born for every 100 girls. In countries where the sex ratio at birth far exceeds 107, this is an indication that sex selection is being practiced on a wide scale.

SEX-SELECTIVE ABORTION IN INDIA *BY THE NUMBERS*

15.8 MILLION

Since 1990, approximately 15.8 million girls in India have been eliminated through sex-selective abortion and other forms of prenatal sex selection.

550,000

Approximately 550,000 girls are selectively aborted every year in India.

111

In India today, approximately 111 boys are born for every 100 girls.

4.1%

Approximately 4.1% of all female live births since 1990 have been prevented by the practice of sex-selective abortion.



CAUSES OF SEX-SELECTIVE ABORTION IN INDIA

1 SON PREFERENCE

Throughout much of India, sons are often valued to carry on the family name and receive inheritance. According to traditional Hindu custom, important religious rituals such as the lighting of the funeral pyre must be performed by a son to assure that parents have a good afterlife. Sons also provide parents with the assurance that they will be cared for—physically, emotionally, and financially—in sickness and old age.

Daughters, on the other hand, are often seen as a burden and a net financial loss. Although illegal, the practice of dowry is still common in India, and couples will often spend a substantial amount of their savings on their daughter's dowry. Moreover, marriage in India is typically patrilocal. Upon marriage, women become part of their husband's family and lineage and typically care for their husband's parents in old age, leaving sonless couples with little support from their children in old age.

2 DECLINING FERTILITY

In recent decades, the number of children couples in India have on average has declined considerably. While women in India in 1970 had about 5.6 children on average, by 2018, women in India were on average having about 2.3 children over their lifetimes. [1] Couples today on average also desire fewer children than they did only a few decades ago. [2] The fact that couples are having fewer children means there are also fewer opportunities they have to try for a son. Many couples seeking to attain their desired number of sons while also limiting the total number of children that they have resort to sex-selective abortion to achieve their desired family composition.



3 UNEQUAL STATUS OF WOMEN

At its root, sex-selective abortion arises from discriminatory attitudes towards women and inequality between women and men in India. Women in India are often denied equal access to health care and education and are often excluded from decision-making in the family. Women in India suffer disproportionately higher mortality rates than would be expected for a country of similar socioeconomic development.[3],[4],[5] Cultural biases often exclude women from inheritance rights and equal pay in employment. Women are often coerced or forced into selectively aborting their daughters by relatives or spouses.[6] Studies have shown that men and women with gender equitable attitudes are significantly less likely to have a strong preference for sons.[7],[8]

4 ACCESSIBILITY OF ULTRASOUND TECHNOLOGY AND ABORTION

Ultrasound is widely available and accessible across India and the cost of an ultrasound scan is affordable for most Indian citizens. In India, it is illegal to determine the sex of an unborn child. However, prenatal sex determination is a lucrative business in India. Despite its illegality, the prenatal sex determination via ultrasound is still practiced in many parts of the country.

Abortion is also widely available and easily accessible in India. Abortion has been legal in India since 1974 when the Medical Termination of Pregnancy Act legalized abortion in most all cases up to 20 weeks gestation. According to one study, there were approximately 15.6 million abortions in India in 2015 alone.[9]

HISTORY OF SEX-SELECTIVE ABORTION IN INDIA

Prior to the widespread availability of ultrasound, couples in India sought to achieve their desired number of sons by having more children, practicing traditional methods believed to increase their chances of conceiving a son, or by practicing postnatal sex selection. With the availability of amniocentesis and ultrasound technology in India during the late 1970s and early 1980s, it became possible to easily determine the sex of an unborn child prior to birth.

In 1983, the Indian Parliament passed a law banning prenatal sex determination services at public hospitals and public health facilities. The law, however, did not apply to private health facilities and the practice of prenatal sex determination via ultrasound increased rapidly through private health providers.

In 1994, Parliament passed a law making it illegal for anyone—including health care workers at private institutions—to reveal the sex of an unborn child. The law was called the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act (or "PNDT Act"). The PNDT Act went into effect in 1996. The PNDT Act required ultrasound clinics to register with the government and prohibited the advertisement of prenatal sex determination services. Health care workers that violated the law could be penalized with up to three years in prison and a 10,000 rupee fine on first offense and up to five years in prison and a 50,000 rupee fine on repeat offense.

The PNDT Act, however, was poorly enforced and the practice of sex-selective abortion continued unabated for several years after the law went into effect. In 2001, the Supreme Court of India in *CEHAT v. Union of India* found the Indian government responsible for failing to properly implement the PNDT Act and ordered the government to fully enforce the law.

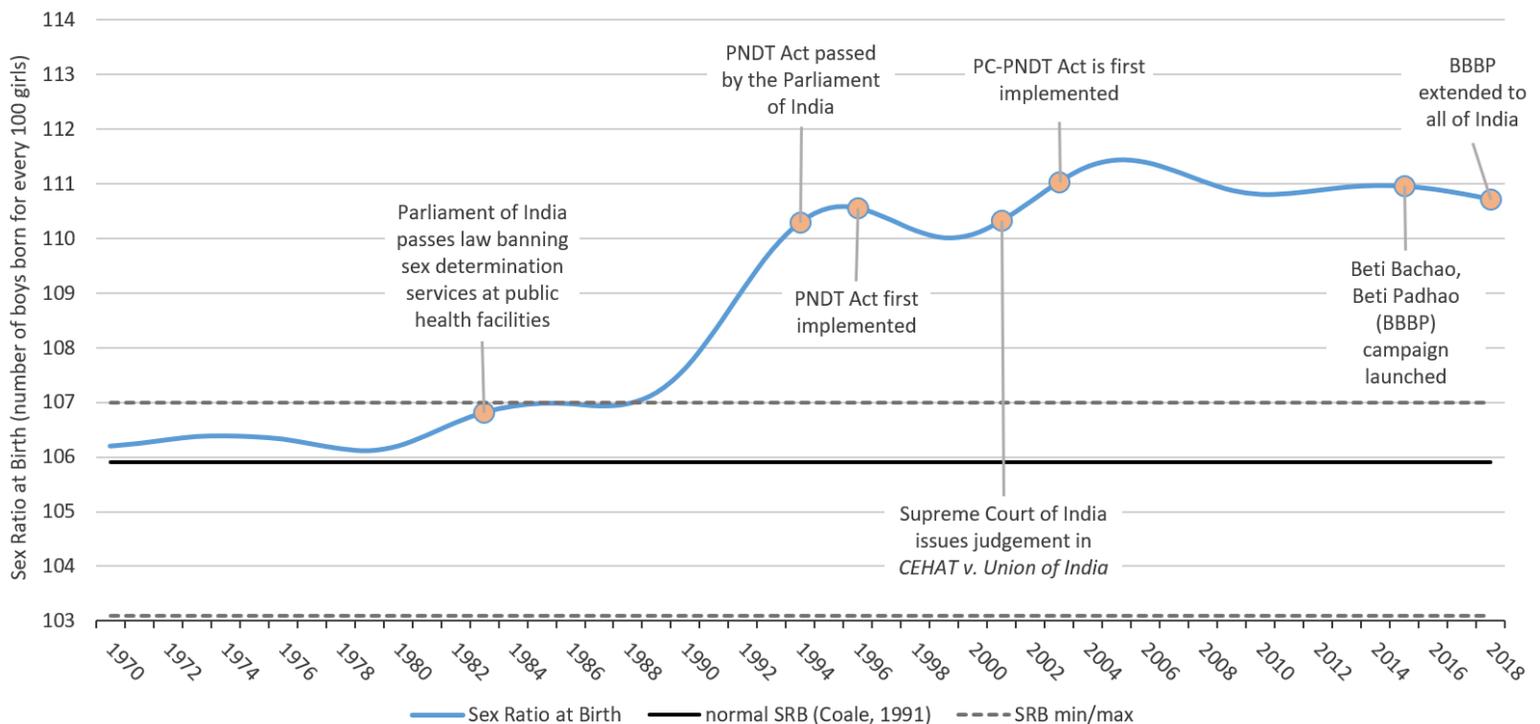
In 2003, Parliament added several amendments to the PNDT Act and renamed it the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act (or "PC-PNDT Act"). The PC-PNDT Act expanded the prohibition on sex selection to include preconceptional methods like IVF and sought to clamp down on unregulated mobile ultrasound clinics. The PC-PNDT Act also set up state-level supervisory boards to ensure that the law was being properly implemented and to create public awareness about the societal harms of sex selection. The new law also doubled the fines for persons seeking sex determination services.



A few years after the PC-PNDT went into effect, India's sex ratio at birth declined slightly and has since leveled-off somewhat. In 2015, the government of India, in 100 select districts, launched Beti Bachao, Beti Padhao (Save the Girl, Educate the Girl) (BBBP), a national public awareness campaign to promote the birth, well-being, and education of girls. In 2018, the BBBP campaign was expanded to all of India. With the roll out of BBBP in 2015, the government also introduced Sukanya Samridhi Yojana, a special savings program that allows parents of daughters to open savings accounts in their daughter's name to save for post-secondary education. Sukanya Samridhi Yojana accounts earn interest at a special interest rate tax exempt.

To the present day, however, the sex ratio at birth in India still remains highly skewed towards males. In 2018, it is estimated that the sex ratio at birth was nearly 111.

SEX RATIO AT BIRTH INDIA, 1975-2018



Source: Sex-ratio at birth (SRB) calculated from: United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Prospects: The 2017 Revision. Normal SRB taken from: Coale AJ. Excess female mortality and the balance of the sexes in the population: an estimate of the number of "missing females". The Population and Development Review 1991 Sep;17(3):517-23.

SOLUTIONS

There are a number of steps the Government of India and other international stakeholders can take in combating the practice of sex-selective abortion.

1 EFFECTIVE ENFORCEMENT OF LAWS BANNING SEX-SELECTIVE ABORTION

In order to reduce the number of sex-selective abortions in India, the central, state, and union territory governments must ensure full and effective implementation of the PC-PNDT Act, including promptly holding medical practitioners that violate the law accountable. The government must ensure that all ultrasound clinics are registered, and that accurate, up-to-date records are kept. The Appropriate Authorities must also immediately investigate any clinics suspected of conducting illegal activity and must take swift action against clinics found to be in violation of the law. In districts where the law has been rigorously implemented, the practice of sex-selective abortion has declined sharply.[10] Laws prohibiting the practice of dowry must also be rigorously enforced.

2 PROMOTE THE EQUAL DIGNITY AND STATUS OF WOMEN

Studies have shown that men and women with gender equitable attitudes and husbands who display low relationship control are significantly less likely to express a strong preference for sons.[11] Promoting the equal dignity and status of women will reduce son preference and thus reduce the motivation for couples to engage in sex selection practices.



3 PUBLIC AWARENESS MESSAGING TO COMBAT STIGMA AGAINST GIRLS

Public and non-governmental stakeholders seeking to combat sex-selective abortion must promote the dignity of girls through public awareness messaging. Such messaging should not only reinforce cultural-based reasons why Indian couples desire daughters, but should also seek to advocate for the equal status of girls and their equal potential to contribute to their families. Public awareness messaging should also focus on segments of society most likely to practice sex-selective abortion. The Government of India should ensure that the national Beti Bachao, Beti Padhao campaign is fully implemented through all levels of government.

4 PROMOTE THE RIGHTS OF GIRLS TO BE BORN AND DISCOURAGE RECOURSE TO ABORTION

Public awareness messaging must advocate for the fundamental right of girls to be born. Combatting sex-selective abortion is fundamentally a human rights issue. Unborn girls have the inherent right to be born, and women have the fundamental right not to be coerced or forced into aborting their daughters. Harmful attitudes devaluing the life of the unborn must be done away with. The government should pursue life-affirming programs for women who feel they cannot raise another daughter such as offering options for adoption[12] or conditional cash incentive programs or tax breaks to help offset the costs of raising a daughter.

5 IMPROVE SOCIOECONOMIC DEVELOPMENT

In the long term, improving socioeconomic development may reduce son preference, thus reducing the motivation for sex-selective abortion. However, socioeconomic development alone will not reduce the practice of sex selection in the short term. Studies have shown that demographic groups with greater wealth, income, education and urban residence in India are in fact more likely to selectively abort daughters than their counterparts.[13],[14],[15],[16],[17]



6 CONDITIONAL CASH TRANSFER SCHEMES AND OTHER INCENTIVES TO ENCOURAGE THE COUPLES TO HAVE DAUGHTERS

Conditional Cash Transfer (CCT) programs which provide couples financial incentives to raise daughters have shown moderate success in some places.[18],[19],[20] CCT programs may be more likely to succeed if they are adequately funded, consistently sustained over a long period of time, are available to a large subset of the population, have high awareness among the target population, and provide payouts that amount to real money for program beneficiaries (i.e., they provide sufficient incentive for couples to participate). CCT programs have sometimes been criticized for providing tangible benefits for only low-income families as the payouts tend to be rather small. For middle class families, other incentives may perhaps be more beneficial such as tax breaks for parents of daughters and access to preferred interest rate loans for small business enterprise for qualifying daughters upon completion of schooling. Starting in 2015, the Government of India, through the Sukanya Samriddhi Yojana program, began offering parents of girls the option of opening special interest rate savings accounts to help save for their daughters' education and to discourage early marriage.

7 INCORPORATE INVOLVEMENT FROM WOMEN'S GROUPS AND NON-GOVERNMENTAL ORGANIZATIONS

Non-governmental organizations (NGOs) and women's groups have an important role to play in combatting prenatal sex selection, offering expertise and on-the-ground interventions within communities to effect lasting change in improving the socioeconomic status of women and can play an important role in discouraging recourse to abortion. Studies have shown that NGOs can have a real impact on reducing the practice of sex selection.[21]



8 END INDIA'S POPULATION CONTROL POLICIES

The government of India has long promoted population control policies. These policies in turn help fuel the practice of prenatal sex selection. Six states in India currently have two-child policies that prohibit civil servants from having more than two children. Studies have shown that these two-child policies have caused a statistically significant male-biased distortion in the sex ratio at birth in states where they are in place.[22] Some CCT programs promoting the birth of daughters also require one or both of the spouses to be sterilized. Such requirements are contrary to women's rights as they incentivize permanent sterilization. They are also counterproductive as couples are not likely to apply to these programs until they have first attained their desired number of sons. In order for the Indian government to eliminate the practice of sex selection, it must abandon population control policies and incentives.

FOOTNOTES

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