

**The Impact of Male Preference, Sex Selection,  
and Female Feticide on Human Trafficking**

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**Background**

Fifteen years ago, Amartya Sen wrote an article in the British Medical Journal introducing the concept of “missing women in Asia.” The phrase referred to early mortality of women due to bias in health care, food, income, education, employment and more. He reached the conclusion that the number of missing women worldwide was greater than 100 million. Other scholars followed up with sophisticated demographic studies and got similarly large numbers. In disaggregated data, he suggested that China has 44 million missing women, India 37 million missing women, and other countries in South Asia and sub-Saharan Africa similar high numbers of missing women.

Four years ago, he revisited this issue and found that over the last decade, female mortality has been reduced substantially as a result of programs to address differences between women and men in their access to sufficient nutrition, health care, reproductive health, and fundamental human rights. However, he noted that these improvements have been “counter-balanced by a growing trend in sex specific abortions of the female fetus.”

As part of a program at the State Department entitled, “The Impact of Sex Selection on Human Trafficking,” I traveled to India early this year to investigate a disturbing trend in India that combines new technologies (such as ultrasound and early term abortion) with traditional practices and preferences (such as the preference for male children).

Research suggests that Indian women are carrying to term and birthing many more males than females. Demographers estimate that Indian women have roughly 6.7 million abortions per year. Aborted girls outnumber boys by 500,000 per year, for a total of 10 million more girls aborted than boys over the past decade. Some doctors in India believe that it is as many as 2 million girl fetuses that are killed per year through abortion simply because they are female.

The 2001 Indian census shows that the national Sex Ratio at Birth (SRB) averages 933 girls for every 1000 boys. However, in some states, especially urban areas where sonograms are readily available, the SRB falls as low as 874 females for every 1000 males. In Punjab, the number of girls for every 1,000 boys is now at 776. Currently India has the lowest sex ratios of any country in the world. If this trend continues, India would have a serious problem related to its birth ratio.

### **Historical, Traditional, and Religious Beliefs**

A number of factors combine to create the Indian preference for male children. One cause is the Hindu belief that parents need a son to perform last rites in order for salvation to be achieved. In addition to the fact that daughters can't perform funeral rites, they also often have to be married off with a substantial dowry. Sons are considered breadwinners who will look after their parents and continue the family name, whereas daughters are often considered a financial burden. While it is true that the preference for boys in India is thousands of years old, the boy-to-girl ratio in India didn't widen precipitously until the advent of the ultrasound in the 1970s, which allowed women to determine the sex of her child by the 4<sup>th</sup> month of pregnancy. This is a traditional practice exacerbated by modern technology.

### **State Responses**

India has been aware of the problem, and grappling to find a solution, for some time. In response, the country has enacted new laws, created new policies and programs, and tested new projects.

#### **1. Law Banning Sex Determination Tests**

In 1994, India passed the Pre-Natal Diagnostic Techniques Act (PDTA). The law bans sex-determination tests for pregnant women, imposes fines for couples who obtain them, and provides for prison terms for doctors who reveal the sex of the fetus to the parents. But there are some hopeful signs. Our latest Human Rights Report noted a Haryana Health Department raid on a maternity clinic run by an unlicensed doctor, A.K. Singh. Officials arrested Singh and seized a portable ultrasound machine and equipment used to terminate pregnancies.”

#### **2. Supreme Court Policy Statement**

In 2001, the Indian Supreme Court issued a policy statement calling on federal and state governments to draw up national action campaigns to enforce the 1994 law. These included registering the hundreds of pre-natal diagnostic centers in each state; calling for the revocation of medical licenses of MDs who perform sex selection abortions; setting up central supervisory boards to make quarterly reports on the implementation of the PDTA; formation of local committees to create local educational campaigns.

### 3. Tamil Nadu Sterilization Program

In 2004, one state, Tamil Nadu, created a program that gave monetary rewards to couples who had one or two girls and agreed to be sterilized. The state also created a Cradle Babies program in which empty cradles were placed in government centers across the state. Couples could abandon unwanted female children without killing them. Other states have tried educational programs, special seminars on the value of the girl child, legal literacy programs, and more.

The Health and Family Welfare Ministry set up a "National Support and Monitoring Cell" to curb the practice of female feticide by targeting and apprehending those who carry out or abet female feticide. The government also encouraged education campaigns to change the social preference for male children and launched a "Save the Girl Child" campaign designed to highlight the achievements of young girls.

In 2007 the New Dehli municipal government sponsored a program that provided every girl born in a government hospital with a gift deposit of \$114 (5,000 rupees) that accumulated interest and could be cashed once the girl reached the age of 18.

Authorities from the village of Lakhanpal in central Punjab ran a program to end female feticide, and as a result, the latest figures showed 1,400 female and 1,000 male births.

### **Loopholes in Enforcement of PDTA and Feticide Policy**

The ban on government medical center use of pre-natal sex selection has led to doctors giving results of a sonogram to parents verbally – eliminating any paper trail that would provide evidence that a subsequent abortion was obtained due to the sex of the fetus. One NGO representative told me that results are sometimes delivered in code, for example: "You will have a fine footballer;" means you have a boy. In the reverse, "I'm sorry it's a cloudy day for you today" means "It's a girl."

As government hospitals have begun to enforce the ban on pre-natal sex selection, thousands of new private ultrasound and abortion clinics have sprung up in every city, town, and village. Unscrupulous abortion clinics prey on parental fears of the cost of the dowry for a grown daughter and promise quick, discrete results. These clinics have multiplied even in areas so poor that they don't have potable water.

### **China**

China also has a serious sex birth ratio imbalance. For over forty years, China has enforced a strict one-child policy, in an attempt to address overpopulation and poverty. In a country in which there is a strong traditional preference for boys, Chinese couples abort female fetuses in hopes that their next pregnancy will be a boy. This situation has created a growing gender imbalance in China, one that has the potential to impact China's future stability.

In 2005, China's sex birth ratio for newborn babies was 118 boys to 100 girls, a nearly double jump from 110 to 100 five years earlier (in 2000). In some regions, such as the southern provinces of Guangdong and Hainan, the ratio has ballooned to 130 boys to 100 girls. (The average for industrialized countries is about 104-107 boys for every 100 girls). Last year, the British medical journal, Lancet, estimated that the male-female gap in China is about 50 million right now. Chinese demographers estimate men will outnumber its women by 300 million in 2020 if the same trends persist.

Traditional preferences for boys directly impact human trafficking, particularly sex trafficking. China's first generations of boys from the one child policy are now in their 20s and 30s. The shortage of girls impacts the ability of young men to find mates for marriage. According to some NGOs, this lack of females is already creating a black market industry for purchase of brides, servile marriage, labor and agricultural trafficking domestic servitude, sexual exploitation, and other forms of abuse and violence.

## **Recommendations**

This problem affects not only India, but neighboring countries like Nepal, Bangladesh, and Pakistan too. While many organizations are documenting the problem, few have tackled the more serious issue of how to address it. My discussions with NGOs and Faith-based organizations are in the initial stages; however, a brief laundry list of possible programmatic response did begin to emerge. I list them here for your perusal, but will want to wait until I've visited China to make final recommendations. They fall roughly into three categories: education and advocacy; incentives; disincentives.

### **A. Education and Awareness**

- "Value Your Girl Child." South Korea had a problem with sex selection and female feticide. The government countered it with an aggressive national education campaign about the value of girl children. While such programs exist in certain states in India, it could be expanded to a national level.
- General Public Film – A Catholic priest in New Delhi has suggested a television series entitled, "What India Would Be Like Without Women."
- Health Providers – A sensitization campaign to enlist health professionals in a campaign about the value of girl children and in policing themselves vis a vis the use of sonograms, amniocentesis and other sex determination technologies.
- Information Communication Technologies (ICT) campaign to increase awareness of the growing imbalance in the boy/girl ratio. For example, a new website has been established by Datamation Foundation Charitable Trust dedicated to the issue of female feticide. The campaign aims to sensitize the general public and women about the importance of girl children. More such web-based campaigns are necessary.

- Community Education. Recognizing that there are disparities among India's communities in their approaches to these issues, relief and development organizations and others need to be educated, trained, and enlisted in the battle to combat female feticide.

## B. Law and Law Enforcement

- Trainings. The laws addressing female feticide are good, but they are not enforced. Trainings aimed at local police, prosecutors, judges, hospital authorities, religious leaders, community leaders, and others in positions of authority are important. These trainings should include background on the laws and policies themselves, investigation techniques, and how to arrest, charge, prosecute, and convict in these cases.
- Complaint lodging process. Developing a formal process by which citizens can lodge complaints against doctors, nurses, hospitals, maternity homes, ultrasound clinics, radiology clinics, and more is essential. Complaints need to be fully documented, and an investigatory body would need to be created to follow up on complaints lodged.
- Inspections. The Ministry of Health and Family Welfare could create a systematic inspection process to address the problem.

## C. Incentives and Disincentives

- \$\$ For Girl Children. In Punjab this year, authorities are offering 100,000 rupees (approximately \$2,000) for every family that brings a girl child to term, birth, and beyond. This model, based on a similar one in France (which rewards French families for every child beyond the second one) is an excellent program.
- Dowry. In earlier times, a dowry was a token gift meant to start a couple out on their marriage with some financial security. Today, the dowry has become a way for the groom's family to accumulate wealth. It has morphed from a token gift to a required condition of marriage, a demand for a specific amount. While the practice of dowry is deeply engrained in the culture, in my meetings with various feminists, it became clear that the principle of dowry as it is now practiced, must be addressed if we are to be successful in our programmatic endeavors. As one feminist noted: "In a patrilineal kinship system where marriages are arranged on principles of dowry and hypergamy, and where women and girl children are objects of exchange along with other forms of wealth, excess female mortality is...an inevitable outcome. Clearly, for a poor family to try to cope with paying dowries for several daughters is a frightening burden and leads to attempts to limit the birth of daughters."