

**LOCATING
PRE-NATAL
SEX SELECTION
IN
REALITY**





Ruhani



Ruhani



Ruhani



Ruhani

missing...



**Mapping the Adverse Child Sex Ratio in
India**



Child Sex Ratio



Calculated as the number of girls per 1000 boys in the 0-6 years age group

Child Sex Ratio

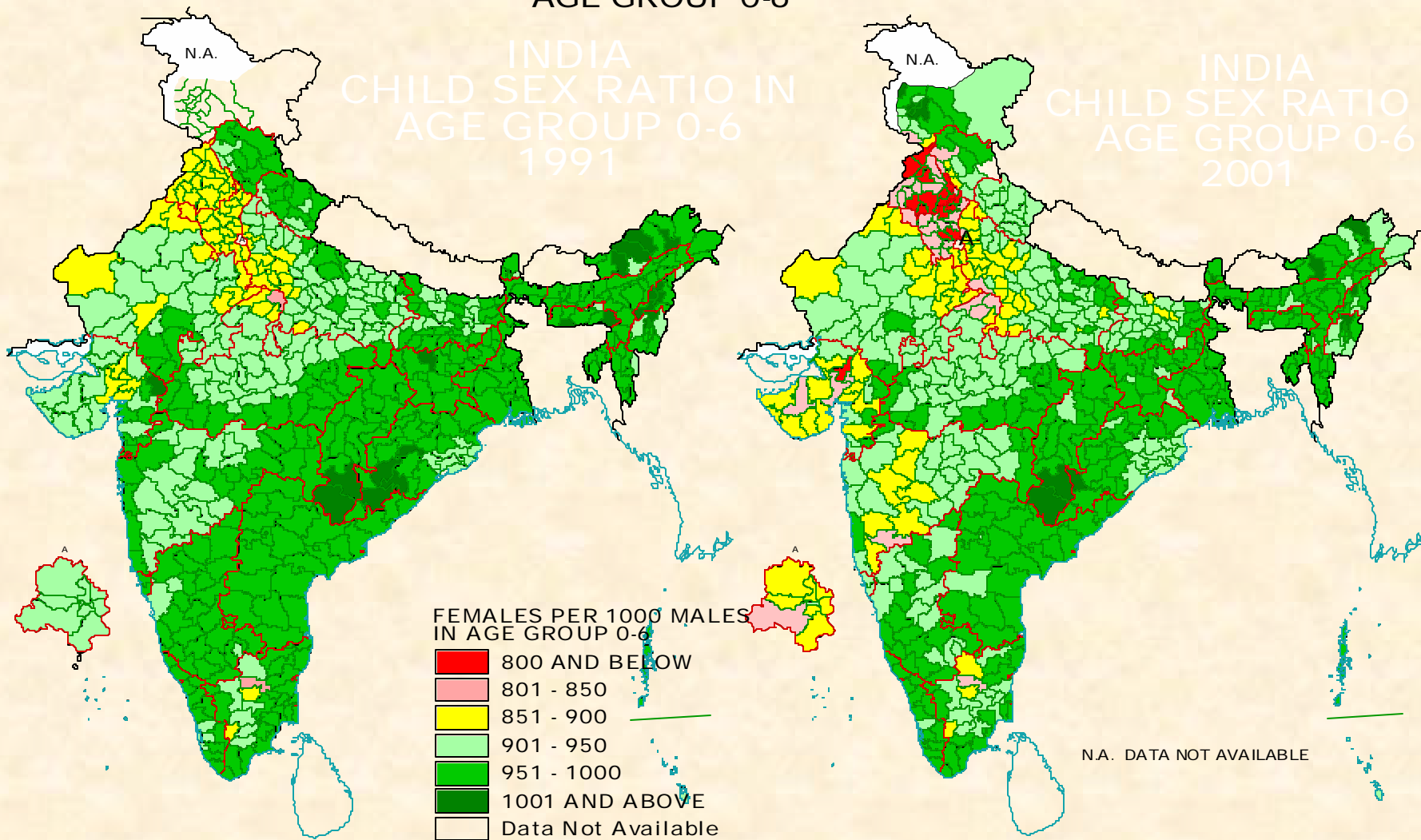


Census	Total	Rural	Urban
1981	962	963	931
1991	945	948	935
2001	927	934	903

INDIA CHILD SEX RATIO IN AGE GROUP 0-6

INDIA
CHILD SEX RATIO IN
AGE GROUP 0-6
1991

INDIA
CHILD SEX RATIO IN
AGE GROUP 0-6
2001



1991

2001

Son Preference and Daughter Aversion



General Reasons

- **Rooted in culture**
 - **dowry**
 - **family name**
 - **property**
 - **last rites**
 - **old-age support**





Son Preference and Daughter Aversion

- Reasons for missing girls

- **Small families but not without sons**

According to NFHS-2 survey, in Delhi for an average ideal family size of 2.4, the desired number of sons is 1.2 and daughters 0.9 and 0.3 of either sex.

- **Access to technology**

- Who is at the centre of this?

- **the aspiring middle class**

- **the urban, the educated and the rich**

Son Preference and Daughter Aversion



According to one micro-study conducted in some hospitals of Delhi:

Ratios are balanced when

- Parents have medium levels of education (high school education)**
- Women are not only educated but also employed outside home**
- When the difference between the incomes of the spouses is marginal**



National Action on the Issue

Census:

Results released and problem highlighted (2001)

Law in place:

Pre-natal Diagnostic Techniques Act and its amendment (2002)

Civil society action:

- through a Public Interest Litigation
- a partnership group set up by government





UNFPA Advocacy Role

Phase I: Initial Actions

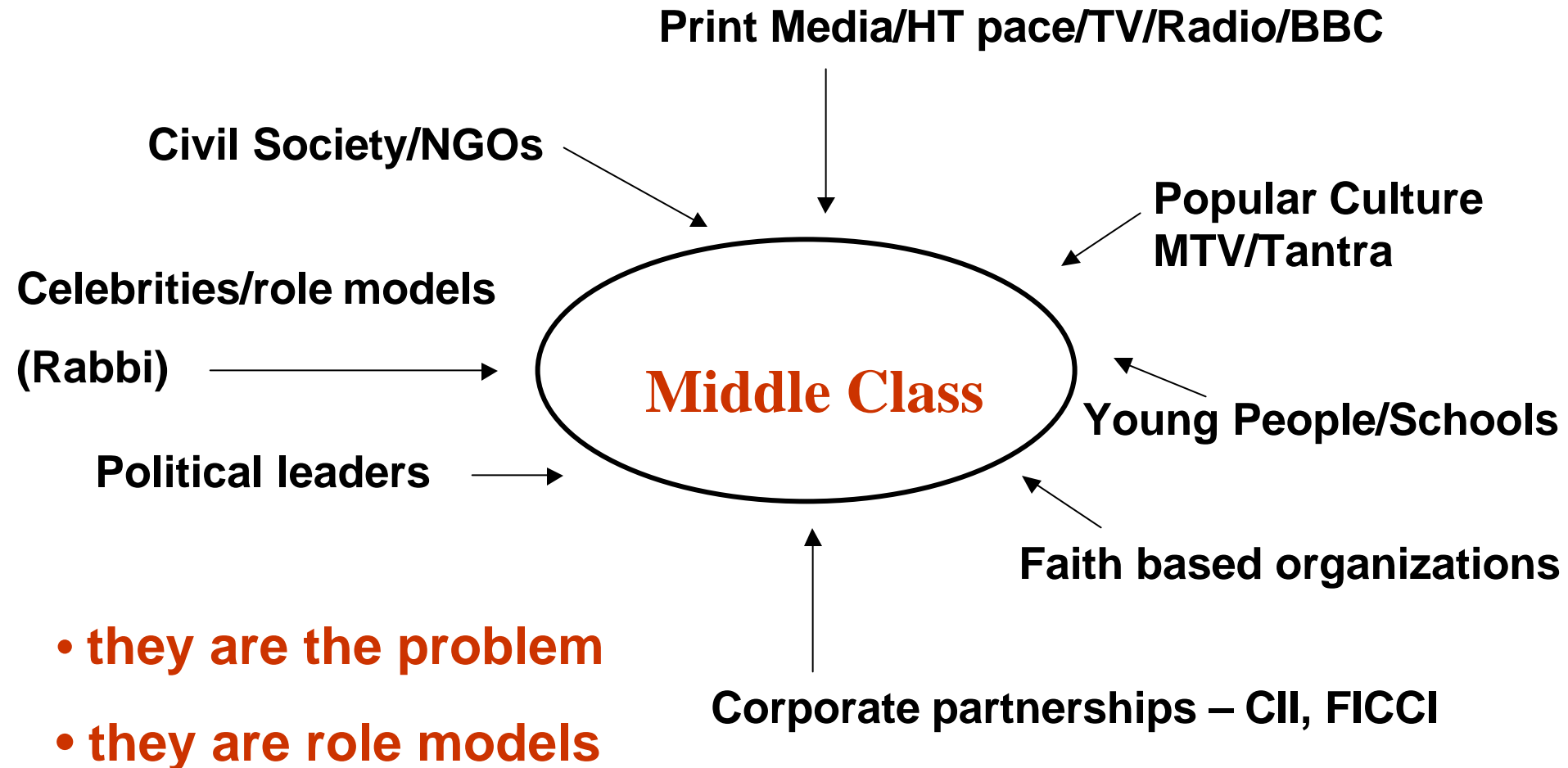
- Release of the booklet – ‘Missing...’
- Recommendation of ICPD +10 consultations
- NGOs funded for grassroots advocacy

Phase II: Putting the issue on many more tables

- Raise the volume of public discourse
- Deepen the understanding of the issue
 - Targeting the middle class and opinion makers not just policy makers

Also, keep alive the larger debate on gender and rights issues in population and development

Intensified Advocacy





Complementary programming work

- Sex selection partnership group (national advocacy strategy)
- Capacity-building of law implementers
- Support to NGOs: monitoring clinic records, mobilisation
- Mainstreaming within key government departments and programmes
- Initiating census data de-composition

Setting the Research Agenda



UNFPA brought together NGOs and researchers, scholars, academicians from different streams

Emerging Research Priorities

- Census data decomposition - single ages
- Correlating SRB and socio-economic variables
- Determinants and consequences of the decline
- Socio-economic impact on community at large
- Breaking myths (old-age support, last rites, etc.)
- Perceptions around pre-natal sex selection
- Impact of interventions and implementation of Act

Lessons and Challenges



- **Lack of credible evidence and data**
Need systematic research
- **No apparent opponent**
Resistance is hidden
- **Supporting women**
Dilemma of standing by a woman eliminates her daughter
- **Medical community**
Allies and adversaries at the same time
- **Separating Abortion and Sex Selection**
How to draw the line?



Lessons and Challenges

- **Ownership vs. Purity of Communication**

When many minds work, outcome unlikely to be uniform.
Need to 'let go'

- **Positioning is important**

Fear - Guilt vs. Love-Value-Cherish

- **Leveraging other's resources**

Identifying and building synergy with existing initiatives – PSBT, BBC research, Population First



Laadi

Celebrate her life

Where are we now?



- Issue on the table, part of public discourse
- Entry-point to other gender and rights issue
- Now move from Advocacy to Enabling Action
 - continued advocacy,
 - implementation of the Act
 - social mobilisation and behaviour change
- Have set a research agenda for a strong evidence base



The Road Ahead

- **Implementation of the Act**
Uninterrupted goes the supply - Medical community remains the most challenging target segment
- **Mainstreaming in government thinking**
Conceptualisation and programming
- **Behaviour change remains fundamental**
Awareness, social mobilisation and grassroots action

Preserving 'mindspace' through continued advocacy
Research for generating evidence

patience, courage and persistence

The Journey Continues...

