



## Female Foeticide in India : A Serious Challenge for the Society

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**Abstract:** Women constitute half a human population have been discriminated, harassed and exploited irrespective of the country to which they belong. Everywhere women are confronted with many challenges. Female foeticide is perhaps one of the worst forms of violence against women where a woman is denied her most basic and fundamental right i.e. “the right to life”. Killing of female child has been a phenomenal characteristic of Indian society under the rule of patriarchy since ancient days. The practice first dubbed as female infanticide came into vogue due to the lack of scientific discovery and unavailability of modern and progressive technology and sophisticated sex determining instruments. With sufficient availability and extensive supply of such sophisticated sex determination techniques in the health institutions and clinics, there have been hundreds of incidences of female foeticide surfacing and hence assuming an alarming proportion across the country at present. It seems that the sex determination test leading to identification of the sex of unborn child has made the practice of killing the female child unnoticed and easier than before. The practice that commenced in India under the influence of the deeply rooted patriarchy, that is, to prove the strength of man over woman, has also been influenced by poverty and dowry.

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### Introduction:

Sex-based discrimination has been studied extensively in the context of son preference in South and Southeast Asia (Dreze and Sen 1989, Gupta 1987, Qian 2008). Differential care given to boys over girls and sex-selective abortions has resulted in an estimated 30 to 70 million "missing" women in India and China alone. While one might expect economic growth to erode such discrimination, son preference (as evidenced by skewed sex ratios) has been persistent despite high growth rates in these countries (Gupta et al. 1998).

Women who constitute half a human population have been discriminated, harassed and exploited irrespective of the country to which they belong, unmindful of the religion which they profess and oblivious of the timeframe in which they live. Everywhere women are confronted with many challenges. Female foeticide is perhaps one of the worst forms of violence against women where a woman is denied her most basic and fundamental right i.e. “the right to life”. The phenomenon of female foeticide in India is not new, where female embryos or fetuses are selectively eliminated after pre-natal sex

determination, thus eliminating girl child even before they are born. In some parts of the country, the sex ratio of girls to boys has dropped to less than 800:1000. The long standing tradition of son preference, coupled with medical technology now gives to the status conscious Indian families, the choice between payment of large dowry for their daughters and elimination of daughters. The traditional method of getting rid of the unwanted girl child was female infanticide, where the female baby was done away with after birth in various ways. With the advancement of medical technology sophisticated techniques can now be used or rather misused, to get rid of her before birth. Through ultrasound scans and amniocentesis, the sex of the foetus can be determined during the pregnancy of the woman and then the foetus is aborted if found to be female.

In Indian society, female foeticide has emerged as a burning social problem during the last few years. The girl child in India is treated right from her birth as an additional burden an extra mouth to feed, a liability and another man’s property. The birth of a son is regarded as essential in Hinduism and many prayers and plentiful offerings are made in

temples in the hope of having a male child. “Women have equal rights with men upon earth; in religion and society they are a very important element. Divine Justice demands that the rights of both sexes should be equally respected since neither is superior to the other in the eyes of Heaven.” The sex ratio has altered consistently in favour of boys since the 20th century to still continue (see Table), and the effect has been most pronounced in the states

of Punjab, Haryana and Delhi. It was in these states that private foetal sex determination clinics were first established and the practice of selective abortion became popular from the late 1970s. Worryingly, the trend is far stronger in urban rather than rural areas, and among literate rather than illiterate women.

### **Sex Ratio and Child Sex Ratio in India**

Given the traditional preference for a male child, it is not surprising that right from the first census of 1871, India has consistently shown an abnormal sex ratio (940 women for every 1000 men). The abnormal sex ratio runs counter to the greater longevity expected of female species who are supposed to be more resilient. It must be remembered that this is possible only if females get equivalent nutrition and access to healthcare.[6,7] Pregnancy-related morbidity and mortality account for 136,000 maternal deaths annually[8] and tend to further distort sex ratios. A steep decline in the sex ratio in recent years has coincided with an increased availability of ultrasound machines.[9,10] About 70% of all abortions performed in Delhi are terminations due to the fetus being female.

The child sex ratio is calculated as number of girls per 1000 boys in the 0-6 years age group and has consistently declined from 976 girls per 1000 boys in 1961 to 945 in 1991 and 927 in the 2001 census. The child sex ratio in India is lower than that in other countries such as China (944), Pakistan (938), Bangladesh (953) and Nigeria (1016). The natural sex ratio is determined by factors such as parental age, duration of birth interval and environmental factors which in turn are influenced by socio-cultural and racial factors. Even in India, the child sex ratio is not uniform across states. In the states of Haryana, Punjab, Delhi, Himachal Pradesh and Gujarat and union territory of Chandigarh, this ratio has declined to less than 900 girls per 1000 boys. In India's capital Delhi, the sex ratio has declined from 915 in 1991 to 865 in 2001. The lowest ratio of 845 has been recorded in the southwest district of Delhi. In contrast, the northeastern states report a higher sex ratio of

above 950.[2] The sex ratio is different in urban and rural areas and is also influenced by religion. For, example, the sex ratio is 906 in urban areas while it is 934 in rural areas. The highest sex ratio is reported amongst Christians (964), while the lowest sex ratios are reported in Sikh (786) and Jain communities. The sex ratio in Hindus is reported to be 925 and that in Muslims to be 950.

### **CAUSES AND EFFECTS**

The important causes of female feticide and infanticide as revealed by studies are as follows:

#### **1. Son desire**

Indian society is patrilineal, patriarchal and patrilocal. Among the Hindus, the reproduction and heredity beliefs are governed by the laws of Manu. Following this law, Hindus believe that a man cannot attain redemption unless he has a son to light his funeral pyre. Besides religious consideration, economic, social and emotional desires favour males, as parents expect sons but non daughters to provide financial support, especially in their old age.

#### **2. Girl as a burden**

The evil of dowry system has led to a belief that daughters have to be protected and sufficient financial resources have to be accumulated to support the marriage of the girl. Boys on the other hand are considered as assets, who fetch a fabulous dowry for the parents. It is a deep rooted instinct of the culture of Haryana that girl is always considered as a Praya Dhan. Moreover, there is thinking among the respondents that a large amount is required for her marriage. Whether she is educated or not, to get a good bridegroom it requires a lot of money in the form of dowry. If girl is educated, the problem becomes even worse, because ‘higher the education, higher the expenditure on marriage to maintain the status’. Even after marriage, girls in Haryana remain liability towards parents and brothers in the form of gifts (Siddha & Kothli) on various festivals every year and in the form of Sindhara (on the occasion of 1st Teej festival after marriage), Pillia (on the birth of a baby), Chhucchhak (when after delivery she visits her Mayka), Bhaat (at the time of her children's marriage). She remains burden on parental family till the end of her life. This has created a stereo-type notion of girl as a “burden” on the household.

#### **3. Education and the gender skew**

The more educated a women is, the more likely she is to actively choose a boy, assuming that

she decides to have one child. The only educated women likely to keep daughters are the very independent minded. Educated men, especially in the business class, also want to have sons to carry on their business.

#### **4. Misuse of technology**

The tests like Amniocentesis and ultrasoundgraphy, which were originally designed for detection of congenital abnormalities of the fetus, are being misused for knowing the sex of the fetus with the intention of aborting it if it happens to be that of a female. Thus, female feticide and infanticide is receiving fillip through misuse of technology, done surreptitiously with the active connivance of the service providers.

#### **5. Weak implementation of laws**

The Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994, prohibits determination of sex of the fetus. It also provides for mandatory registration of genetic counselling centres, clinics, hospitals, nursing homes, etc. However, the implementation of the law is weak and it has not been used to the fullest. The focus has been only on the registration of the number of ultrasound machines and not on the actual act of abortions of female fetuses. Furthermore, in several cases the accused have not been booked under relevant sections of the Act.

#### **6. Gender discrimination:**

The bias against females in India is grounded in cultural, economic and religious roots. Sons are expected to work in the fields, provide greater income and look after parents in old age. In this way, sons are looked upon as a type of insurance. In addition, in a patriarchal society, sons are responsible for ipreservationî of the family name. Also, as per Hindu belief, lighting the funeral pyre by a son is considered necessary for salvation of the spirit. This strong preference for sons which results in a life-endangering deprivation of daughters, is not considered abhorrent culturally and socially. In north India, girls currently constitute about 60% of the unwanted births and the elimination of unwanted fertility in this manner has the potential to raise the sex ratio at birth to 130 boys per 100 girls. Gender discrimination manifests itself in the form of delay in seeking medical care, seeking care from less qualified doctors and spending lesser money on medicines when a daughter is sick. The extreme disappointment of a mother as a result of a daughteris birth can

adversely affect her ability to breastfeed the girl child, which leads to poor nutritional status. It is no wonder that the prevalence of malnutrition and stunting is higher in girls than boys.

#### **7. Dowry:**

The evil practice of dowry is widely prevalent in India. As a result, daughters are considered to be an economic liability. The dowry system is more rigid in the northern states of India which is likely to contribute to the lesser child sex ratio. Women have little control over economic resources and the best way for a young north Indian bride to gain domestic power mainly comes from her ability to produce children, in particular, sons. Most often in south Indian communities, marriages are not exogamous (but often consanguineous), and married daughters usually stay close socially and geographically to their original family. Until recently, dowries were unheard of and benefits of inheritance for the daughters were not ruled out. In the Muslim community, paying of high dowry is not a prevalent practice. Also consanguineous marriages are highly prevalent and women are entitled to a portion of parental inheritance.

#### **Strategies to Curb Female Feticide**

Female feticide is a symptom of an underlying malady. Its incidence is increasing as families perceive that bearing daughters does not make economic sense and does not provide any social advantages. Added to that is generations of bias that favors bearing a male child. Hence, efforts directed selectively towards curbing the practice of prenatal sex determination are unlikely to provide rich dividends. However, measures aimed at improving the status of women in the society are likely to show beneficial effects only after several years. This situation calls for a two-pronged strategy: one to take steps to improve the status of women in the society and the other to ensure effective implementation of the Prenatal Diagnostic Techniques (PNDT) Act so that families find it difficult to undertake sex determination and selective abortion.

The successive Indian governments have taken several steps to improve the status of women in the society. The steps primarily intend to provide them with greater opportunities for education, employment and greater say in the matters of governance. They have included steps to correct the bias in terms of inheritance rights. The PNDT Act is a law made with good intentions. It bans sex selection before and after conception, and further regulates the

use of prenatal diagnostic techniques for strictly medical purposes.

In particular, the law restricts the use of diagnostic techniques to registered institutions and operators, which have to maintain detailed records. Violations of the PNDT Act carry a three-year jail term and a fine of about Rs 10000 (US \$250) for the first offence and a five-year jail term and a fine of Rs 50000 (US \$1250) for the second offence.

So far, there have been only two successful convictions under the law: a, fine of Rs 300 (US \$7) and another fine of Rs 4000 (US \$98) from over 400 cases lodged under the PNDT Act. The reason why the law has proved ineffective is because it is difficult to regulate all clinics that use ultrasound for sex determination as well as for a host of other purposes including detection of genetic abnormalities in the fetus.

Its implementation needs to be improved upon. There is a need to plug the loopholes. Registration procedures should be made tougher and clinics run by technicians and unqualified personnel should be registered and better regulated. Use of ingenious ways to convey the sex of the fetus should also be curbed through greater use of surprise checks and dummy patients. The PNDT Act is rendered ineffective because of the liberal MTP (Medical Termination of Pregnancy) Act which allows abortion on several grounds including mental trauma and failure of contraceptives. Even though the use of blatant hoardings and advertisements of sex determination seem to have disappeared, spread of information about clinic services is now done by word of mouth. MTP providers need to be more vigilant when performing second-trimester abortions. While the feminist discourse on abortion advocates that abortion is a right over one's body, sexselective abortion in itself is a form of female violence.

***Intensive Information, Education and Communication (IEC) campaigns for raising awareness:***

The Government has recently launched a 'Save the Girl Child Campaign'. One of its main objectives is to lessen the preference for a son by highlighting the achievements of young girls. To achieve the long-term vision, efforts are afloat to create an environment where sons and daughters are equally valued. Boys need to be educated at an early level with regard to giving respect and equal regard to girls. The mass media must be involved in promoting a positive image of women. School and college girls should be the target audience. However, this should

be combined with highlighting the issue and dangers of female feticide and skewed gender ratio. Analysis of content of information provided regarding abortion and sex determination showed that the message emphasized upon the illegality of sex-selective abortion instead of describing the difference between sex-selective abortion and other abortions.[34] Various Non-Governmental Organizations (NGOs) are already taking an active lead in this area. It must be emphasized that involvement of community leaders as well as influential persons would go a long way in assuring success in such campaigns. However, the root causes of gender bias need to be tackled first and steps towards woman empowerment must be strengthened.

***Women empowerment:***

Education of women is a powerful tool for improving nutrition levels, raising the age at marriage, acceptance of family planning, improvement in self-image, and their empowerment. NGOs may be encouraged to promote formation of self-help groups, organize non-formal education for adult females and school dropouts, create employment opportunities for women as well as provide counseling and support services to newly married and pregnant women to discourage them from undergoing sex-selective abortion.

***Role of medical colleges and professional bodies:***

While many medical practitioners have joined campaigns against the misuse of these technologies with the support of professional associations, some have been strong supporters of sex-selective abortion emphasizing that it is the family's personal decision to determine the sex of their children. Hence the role of medical colleges and professional bodies such as Indian Medical Association (IMA), Federation of Obstetric and Gynecological Societies of India (FOGSI) and association of radiologists, in countering this burning issue needs to be given due importance. This may include i Sensitizing medical students regarding the adverse sex ratio while stressing upon the ethical issues involved in female feticide. i Conduct regular workshops/ Continuing Medical Education sessions which would greatly help to reiterate the importance of this problem in the country. Private practitioners should also be encouraged to participate in such programs. i Organize awareness campaigns in field practice areas. India has yet a long way to go in her fight against pre-birth elimination of females. Time is quickly ticking away. A shortage of girls would lead

to a shortage of eligible brides thus making the girl a scarce commodity. According to UNFPA projection, by the year 2025 a significant share of men above 30 would still be single, and that many will never be able to marry at all.[31] Men in the states of Haryana and Punjab are already experiencing a nearly 20% deficit of marriageable women.

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