



Female foeticide in India

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Female foeticide in India is the abortion of a female foeticide outside of legal methods. Many celebrities in India have publicly supported the Beti Bachao campaign. Foeticide or feticide is an act that causes the death of a fetus. In a legal context, it refers to the deliberate or incidental killing of a fetus due to a criminal human act, such as a blow to the abdomen of a pregnant woman. As a medical term, feticide is destruction of a fetus, for example as the first phase of a legal induced abortion (wikipedia, 2011). The latter in some specific situations is inevitable and legal especially in the incipient phase of pregnancy, it is long debated. But the sex selective abortion is not at all supportable. 'Historically, in the absence of genetic testing, infanticide was the only inhumane option for discarding the female child. This heinous practice continues today in the southern parts of India where families cannot afford an illegal ultrasound test. People in Punjab, Haryana and other Western states can afford illegal test to determine the sex of the baby and discard it' (From The Tribune, Chandigarh 2003/09/12).

Factors Leading To Female Foeticide The frequency of female foeticide in India is assumed to be an estimation derived from its high birth sex ratio, that is the ratio of boys to girls at birth. The natural ratio is assumed to be between 103 and 107, and any number above it is considered as suggestive of female foeticide. According to the decennial Indian census, the sex ratio in the 0 to 6 age group in India has risen from 102.4 males per 100 females in 1961, to 104.2 in 1980, to 107.5 in 2001, to 108.9 in 2011.

The child sex ratio is within the normal natural range in all eastern and southern states of India, but significantly higher in certain western and particularly northwestern states such as Maharashtra, Haryana, Jammu & Kashmir (118, 120 and 116, as of 2011, respectively).^[4] The western states of Maharashtra and Rajasthan 2011 census found a child sex ratio of 113, Gujarat at 112 and Uttar Pradesh at 111. The Indian census data suggests there is a positive correlation between abnormal sex ratio and better socio-economic status and literacy. This may be connected to the dowry system in India where dowry deaths occur when a girl is seen as a financial burden. Urban India has higher child sex ratio than rural India according to 1991, 2001 and 2011 Census data, implying higher prevalence of female foeticide in urban India. Similarly, child sex ratio greater than 115 boys per 100 girls is found in regions where the predominant majority is Hindu, Muslim, Sikh or Christian; furthermore "normal" child sex ratio of 104 to 106 boys per 100 girls are also found in regions where the predominant majority is Hindu, Muslim, Sikh or Christian. These data contradict any hypotheses that may suggest that sex selection is an archaic practice which takes place among uneducated, poor sections or particular religion of the Indian society.

There is an ongoing debate as to whether these high sex ratios are only caused by female foeticide or some of the higher ratio is explained by natural causes.^[2] The Indian government has passed Pre-Conception and Pre-Natal Diagnostic Techniques Act (PCPNDT) in 1994 to ban and punish prenatal sex screening and female foeticide. It is currently illegal in India to determine or disclose sex of the foetus to anyone. However, there are concerns that PCPNDT Act has been poorly enforced by authorities.

High Sex Ratio Implications One school of scholars suggest that any birth sex ratio of boys to girls that is outside of the normal 105-107 range, necessarily implies sex-selective abortion. These scholars claim that both the sex ratio at birth and the population sex ratio are remarkably constant in human populations. Significant deviations in birth sex ratios from the normal range can only be explained by manipulation, that is sex-selective abortion. In a widely cited article, Amartya Sen compared the birth sex ratio in Europe (106) and United States (105) with those in Asia (107+) and argued that the high sex ratios in East Asia, West Asia and South

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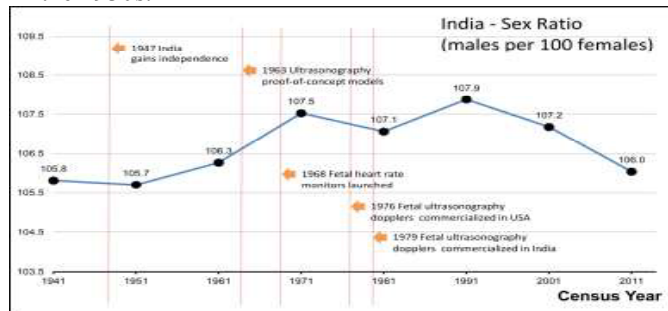
Asia may be due to excessive female mortality. Sen pointed to research that had shown that if men and women receive similar nutritional and medical attention and good health care then females have better survival rates, and it is the male which is the genetically fragile sex. Sen estimated ‘missing women’ from extra women who would have survived in Asia if it had the same ratio of women to men as Europe and United States. According to Sen, the high birth sex ratio over decades, implies a female shortfall of 11% in Asia, or over 100 million women as missing from the 3 billion combined population of India, other South Asian countries, West Asia, North Africa and China.

High Human Sex Ratio May Be Natural Other scholars question whether birth sex ratio outside 103-107 can be due to natural reasons. William James and others^s suggest that conventional assumptions have been:

- there are equal numbers of X and Y chromosomes in mammalian sperms
- X and Y stand equal chance of achieving conception
- therefore equal number of male and female zygotes are formed, and that
- therefore any variation of sex ratio at birth is due to sex selection between conception and birth.

James cautions that available scientific evidence stands against the above assumptions and conclusions. He reports that there is an excess of males at birth in almost all human populations, and the natural sex ratio at birth is usually between 102 and 108. However the ratio may deviate significantly from this range for natural reasons such as early marriage and fertility, teenage mothers, average maternal age at birth, paternal age, age gap between father and mother, late births, ethnicity, social and economic stress, warfare, environmental and hormonal effects. This school of scholars supports their alternate hypothesis with historical data when modern sex-selection technologies were unavailable, as well as birth sex ratio in sub-regions, and various ethnic groups of developed economies. They suggest that direct abortion data should be collected and studied, instead of drawing conclusions indirectly from human sex ratio at birth. James hypothesis is supported by historical birth sex ratio data before technologies for ultra sonographic sex-screening were discovered and commercialized in 1960s and 1970s, as well by reverse abnormal sex ratios currently observed in Africa. Michel Garenne reports that many African nations have, over decades, witnessed birth sex ratios below 100, that is more girls are born than boys. Angola, Botswana and Namibia have reported birth sex ratios between 94 and 99, which is quite different than the presumed 104 to 106 as natural human birth sex ratio. South Korea’s historical records suggest a birth sex ratio of 1.13, based on 5 million births, in 1920s over a 10-year period. Other historical records from Asia too support James hypothesis. For example, Jiang et al. claim that the birth sex ratio in China was 116–121 over a 100-year period in late 18th and early 19th century; in the 120–123 range in early 20th century; falling to 112 in the 1930s.

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Male to female sex ratio for India, based on its official census data, from 1941 through 2011. The data suggests the existence of high sex ratios before and after the arrival of ultrasound-based prenatal care and sex screening technologies in India.

Female foeticide has been linked to the arrival, in the early 1990s, of affordable ultrasound technology and its



widespread adoption in India. Obstetric ultra sonography, either trans vaginally or trans abdominally, checks for various markers of fetal sex. It can be performed at or after week 12 of pregnancy. At this point, ³D₄ of fetal sexes can be correctly determined, according to a 2001 study. Accuracy for males is approximately 50% and for females almost 100%. When performed after week 13 of pregnancy, ultra sonography gives an accurate result in almost 100% of cases.

Availability Ultrasound technology arrived in China and India in 1979, but its expansion was slower in India. Ultrasound sex discernment technologies were first introduced in major cities of India in 1980s, its use expanded in India’s urban regions in 1990s, and became widespread in 2000s.

Magnitude Estimates for female foeticide Estimates for female foeticide vary by scholar. One group estimates more than 10 million female foetuses may have been illegally aborted in India since 1990s, and 500,000 girls were being lost annually due to female foeticide. MacPherson estimates that 100,000 abortions every year continue to be performed in India solely because the fetus is female.

The following table presents the child sex ratio data for India’s states and union territories, according to 2011 Census of India for population count in the 0-1 age group. The data suggests 18 states/UT had birth sex ratio higher than 107 implying excess males at birth and/or excess female mortalities after birth but before she reaches the age of 1, 13 states/UT had normal child sex ratios in the 0-1 age group, and 4 states/UT had birth sex ratio less than 103 implying excess females at birth and/or excess male mortalities after birth but before he reaches the age of 1.



Reasons for Female Foeticide

Various theories have been proposed as possible reasons for sex-selective abortion. Culture is favored by some researchers, while some favor disparate gender-biased access to resources. Some demographers question whether sex-selective abortion or infanticide claims are accurate, because underreporting of female births may also explain high sex ratios. Natural reasons may also explain some of the abnormal sex ratios. Klasen and Wink suggest India and China's high sex ratios are primarily the result of sex-selective abortion.

Cultural preference

One school of scholars suggest that female foeticide can be seen through history and cultural background. Generally, male babies were preferred because they provided manual labor and success the family lineage. The selective abortion of female fetuses is most common in areas where cultural norms value male children over female children for a variety of social and economic reasons. A son is often preferred as an "asset" since he can earn and support the family; a daughter is a "liability" since she will be married off to another family, and so will not contribute financially to her parents. Female foeticide then, is a continuation in a different form, of a practice of female infanticide or withholding of postnatal health care for girls in certain households. Furthermore, in some cultures sons are expected to take care of their parents in their old age. These factors are complicated by the effect of diseases on child sex ratio, where communicable and noncommunicable diseases affect males and females differently.

Disparate gendered access to resource

Some of the variation in birth sex ratios and implied female foeticide may be due to disparate access to resources. As MacPherson (2007) notes, there can be significant differences in gender violence and access to food, healthcare, immunizations between male and female children. This leads to high infant and childhood mortality among girls, which causes changes in sex ratio.

Disparate, gendered access to resources appears to be strongly linked to socioeconomic status. Specifically, poorer families are sometimes forced to ration food, with daughters typically receiving less priority than sons (Klasen and Wink 2003). However, Klasen's 2001 study revealed that this practice is less common in the poorest families, but rises dramatically in the slightly less poor families. Klasen and Wink's 2003 study suggests that this is "related to greater female economic independence and fewer cultural strictures among the poorest sections of the population." In other words, the poorest families are typically less bound by cultural expectations and norms, and women tend to have more freedom to become family breadwinners out of necessity.

Lopez and Ruzikah (1983) found that, when given the same resources, women tend to outlive men at all stages of life after infancy. However, globally, resources are not always allocated equitably. Thus, some scholars argue that disparities in access to resources such as healthcare, education, and nutrition play at least a small role in the high sex ratios seen in some parts of the world.

India passed its first abortion-related law, the so-called Medical Termination of Pregnancy Act of 1971, making abortion legal in most states, but specified legally acceptable reasons for abortion such as medical risk to mother and rape. The law also established physicians who can legally provide the procedure and the facilities where abortions can be performed, but did not anticipate female foeticide based on technology advances. With increasing availability of sex screening technologies in India through the 1980s in urban India, and claims of its misuse, the Government of India passed the Pre-natal Diagnostic Techniques Act (PNDT) in 1994. This law was further amended into the Pre-Conception and Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) (PCPNDT) Act in 2004 to deter and punish prenatal sex screening and female foeticide. However, there are concerns that PCPNDT Act has been poorly enforced by authorities.

The impact of Indian laws on female foeticide and its enforcement is unclear. United Nations Population Fund and India's National Human Rights Commission, in 2009, asked the Government of India to assess the impact of the law. The Public Health Foundation of India, an premier research organization in its 2010 report,



claimed a lack of awareness about the Act in parts of India, inactive role of the Appropriate Authorities, ambiguity among some clinics that offer prenatal care services, and the role of a few medical practitioners in disregarding the law. The Ministry of Health and Family Welfare of India has targeted education and media advertisements to reach clinics and medical professionals to increase awareness. The Indian Medical Association has undertaken efforts to prevent prenatal sex selection by giving its members *Beti Bachao* (save the daughter) badges during its meetings and conferences. However, a recent study by Nandi and Deolalikar (2013) argues that the 1994 PNDT Act may have had a small impact by preventing 106,000 female foeticides over one decade.

According to a 2007 study by MacPherson, prenatal Diagnostic Techniques Act (PCPNDT Act) was highly publicized by NGOs and the government. Many of the ads used depicted abortion as violent, creating fear of abortion itself within the population. The ads focused on the religious and moral shame associated with abortion. MacPherson claims this media campaign was not effective because some perceived this as an attack on their character, leading to many becoming closed off, rather than opening a dialogue about the issue. This emphasis on morality, claims MacPherson, increased fear and shame associated with all abortions, leading to an increase in unsafe abortions in India.

The government of India, in a 2011 report, has begun better educating all stakeholders about its MTP and PCPNDT laws. In its communication campaigns, it is clearing up public misconceptions by emphasizing that sex determination is illegal, but abortion is legal for certain medical conditions in India. The government is also supporting implementation of programs and initiatives that seek to reduce gender discrimination, including media campaign to address the underlying social causes of sex selection.

Given the dismal Child Sex Ratio in the country, and the Supreme Court directive of 2003 to State governments to enforce the law banning the use of sex determination technologies, the Ministry set up a National Inspection and Monitoring Committee (NIMC). Dr. Rattan Chand, Director (PNDT) was made the convenor of the NIMC. The NIMC under the guidance of Dr. Rattan Chand conducted raids in some of the districts in Maharashtra, Punjab, Haryana, Himachal Pradesh, Delhi and Gujarat. In April, it conducted raids on three clinics in Delhi. In its reports sent to the Chief Secretaries of the respective States, the committee observed that the Authorities had failed to monitor or supervise the registered clinics.

Other recent policy initiatives adopted by many states of India, claims Guilmoto, attempt to address the assumed economic disadvantage of girls by offering support to girls and their parents. These policies provide conditional cash transfer and scholarships only available to girls, where payments to a girl and her parents are linked to each stage of her life, such as when she is born, completion of her childhood immunization, her joining school at grade 1, her completing school grades 6, 9 and 12, her marriage past age 21. Some states are offering higher pension benefits to parents who raise one or two girls. Different states of India have been experimenting with various innovations in their girl-driven welfare policies. For example, the state of Delhi adopted a pro-girl policy initiative (locally called *Laadli scheme*), which initial data suggests may be lowering the birth sex ratio in the state.

Response from others

Increasing awareness of the problem has led to multiple campaigns by celebrities and journalists to combat sex-selective abortions. Aamir Khan devoted the first episode “Daughters Are Precious” of his show *Satyamev Jayate* to raise awareness of this widespread practice, focusing primarily on Western Rajasthan, which is known to be one of the areas where this practice is common. Its sex ratio dropped to 883 girls per 1,000 boys in 2011 from 901 girls to 1000 boys in 2001. Rapid response was shown by local government in Rajasthan after the airing of this show, showing the effect of media and nationwide awareness on the issue. A vow was made by officials to set up fast-track courts to punish those who practice sex-based abortion. They cancelled



the licences of six sonography centres and issued notices to over 20 others.

This has been done on the smaller scale. Cultural intervention has been addressed through theatre. Plays such as 'Pacha Mannu', which is about female infanticide/foeticide, has been produced by a women's theatre group in Tamil Nadu. This play was showing mostly in communities that practice female infanticide/foeticide and has led to a redefinition of a methodology of consciousness raising, opening up varied ways of understanding and subverting cultural expressions.

The Mumbai High Court ruled that prenatal sex determination implied female foeticide. Sex determination violated a woman's right to live and was against India's Constitution.

The *Beti Bachao*, or Save girls campaign, has been underway in many Indian communities since the early 2000s. The campaign uses the media to raise awareness of the gender disparities creating, and resulting from, sex-selective abortion. *Beti Bachao* activities include rallies, posters, short videos and television commercials, some of which are sponsored by state and local governments and other

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In India female Foeticide is taking place for various factors viz. economic, socio-ritual, and technological.

A) Economic Factors: the female Foeticide in the 21st century have a great deal to do with capitalist modernity. There are aspects of it lying behind these phenomena.

i) For rural households with landed property there is a clear inverse correlation between the income level and child sex ratio. It is especially evident in south India. Again there is gender based wage level. For the same work females are paid less remuneration. In most cases women enter in the domestic non-paid services which a patriarchal society gives little or no value at all, so they are regarded as liability than assets.

ii) Cultural politics of dowry in the Indian society have a lot of answer for this pernicious phenomenon. Since the turn of century the recorded dowry deaths are increasing. Nearly 7- 8000 per year brides are murdered for the lack of full payment of dowry. Nearly 3-5000 brides are committing suicides for dowry. Brides are thought as commodities and the pre marriage and marriage have been described as 'consumption oriented reproductive journey'. When the reproductive practices make daughters into such economic burden, the threat of having to amass dowry is motive enough to dispose female commodities (Barbara Harriss-White, 2009)

iii) The female foeticide has been commodified. It has started to become a field of accumulation in its own right. Malini Bhattacharya, the member of the national commission for women, admitted that in the era of liberalisation "one has to allow freedom of choice to the service seeker and the freedom to sell by the service provider". Foeticide may cost one or two month's earnings, while dowry requires mobilisation of several years' income. Hence there appears equilibrium between service seeker and provider. UNICEF estimates that the turnover of foeticide industry has now reached 244 million dollar from 77 million dollar in 2006. (Barbara Harriss-White, 2009). Those who disapproved of the practice of sex selective abortions but engaged in it against their principles expressed their compulsions and helplessness due to pressures arising out of unhealthy competition in the health care service sector. It was said that if they did not provide abortion care services, some others would have provided them (Tandon and Sharma, 2008)

b) Socio-ritual factors: females are vulnerable to brutalities of the male in the forms of physical, mental and sexual assaults and traumas in the patriarchal societal structure of India. Females are subjugated, condemned, and deprived in sphere of life. Every parents of a girl child is at risk for their daughter in this patriarchal society for the mentioned causes. Again for the funeral ceremonies of the parents, presence of a son is a must. According to Manu, A man cannot attain moksha (redemption) unless he has a son to light his funeral pyre. In old age the

sons will care for them believably. These socio-rituals factors including illiteracy and orthodox society norms lead to crave for a male baby, discarding the females one after another.



c) Technological factors: Female foeticide is a latest trend of long established gender bias. We are civilized with time and our killing female babes have also been civilized. The presence of low-cost technologies like ultrasound, have led to sex-based abortion of female fetuses, and an increasingly smaller percentage of girls born each year (Jain, 2005)

d) Population Policy: Indian family planning policies promote a two-child family and health workers say this often leads to abortion of female foetuses in efforts to have a “complete family” with at least one son. (Sen, 2005)

PATTERN OF FEMALE FOETICIDE ACROSS THE STATES

Female foeticides are common in all states of India irrespective of caste, class, religion, or north south divide. About 5-7 lakh girls a year or 2000 girls a day go missing in India due to female foeticide. During 2000, the highest occurrences of female foeticides are concentrated in Maharashtra (45.1% of India’s total foeticides), followed by the states of Madhya Pradesh, Haryana, Rajasthan, Andhra Pradesh (Fig. No.1).

THE IMPACTS OF FEMALE FOETICIDES

The immediate impacts of female foeticides the unbalanced sex ratio. The child sex ratio for the age group of 0-6 years has currently 927 per 1000 boys. Punjab has 798 girls, Haryana 819, Delhi 868 and Gujarat 883 per 1000 boys. It is found that there is a gradual decline in the sex ratio from 1901 to 1941 due to infanticides and foeticides and there is a fluctuation in the sex ratio ‘Death Before Birth’ - A Study On Female Foeticide In India between 1941 and 2001. Here one thing is attracting our attention that though there is substantial increase in the over all sex ratio in India from 1991-2001, there is drastic decline in the child sex ratio (CSR). The overall sex ratio increased from 929 to 933 during 1991 and 2001, but the CSR fall from 945 to 927 during that period (Fig. No. 2)

This fall in CSR indicates that during the 1991-2001 there may substantial female foeticide. As the sex CSR declines, in near future overall sex ratio will do the same. This decline in the sex ratio will badly hamper the social structure and the development process. This imbalance would have serious repercussions for Indian society in future, especially on the status of women, leading to increased sexual violence including prostitutions, trafficking and the reduced mobility of women. Recent reports in local media said young men in Punjab and Haryana were finding it hard to find brides. Indira Gandhi, Mother Teresa, Kalpana Chawla all these special names have one thing in common, “they were all women”. Killing the girl child by making pre-birth investigation is the social sin destroying the roots of the Indian society. And one will come when the females will be disappeared from the earth i.e. the human race will also face the extinction.

REVIEW OF THE MEASURE TAKEN TO COMBAT FEMALE FOETICIDES: in the modern period of Indian history, there has a no. of measures taken to combat the female infanticides recently foeticides either as an institutional measures or as an individual initiatives.

A) Institutional measures:

1) PNDT (Regulation and Prevention of Misuse) Act-1994: Maharashtra is the first state in country to ban pre-natal sex determination through the enactment of Maharashtra regulation of prenatal diagnostics techniques act. Similar efforts at the national level resulted in the enactment of the Central pre-natal diagnostic techniques (Regulation and prevention of misuse) Act 1994. The act has two aspects viz., regulatory and preventive. It seeks to regulate the use of pre-natal diagnostic techniques for legal or medical purposes and prevent misuse for illegal purposes. The act provides for the setting up of various bodies along with their composition powers and functions. There is a central supervisory board, appropriate authorities and advisory committees. Violations of the PNDT Act carry a five year jail term and a fine of about 2,300 U.S. dollars.

2) The Supreme Court of India has issued notices to the Indian government and the states and union territories on a petition seeking stricter implementation of laws that ban pre-natal sex- selection tests and sex-selective abortions in India. A concerned Supreme Court observed that the Pre-Conception and Pre-Natal Diagnostic



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Techniques (Prohibition of Sex Selection) Act 1994 (PCPNDT) that is meant to prevent female foeticide in India, has failed. The petition brought to the court’s attention the rampant practice of sex-selective abortions in many parts

of the country, with doctors indiscriminately conducting sex-determination tests and carrying out abortions because of lax implementation of the PCPNDT Act.

3) UNICEF is committed to protecting every child from violence, exploitation, abuse and discrimination.

4) The government would declare January 24, 2010 as the national girl child day with a focus on targeting the scourges of female foeticide, domestic violence and malnutrition.

B) Individual and group appeals and initiatives: In modern India, there have always been the protests against female infanticides by various national leaders like Vidyasagar, Raja Ram Mohan Roy, and Mahatma Gandhi a few names to mention. In the very recent decades, many persons from different walks of life have protested against the female foeticides.

1) Describing female foeticide as a “disgrace” to society Mrs. Pratibha Patil India’s first women President has called upon the medical fraternity to ensure that diagnostic tests are not misused for pre-natal gender determination.

2) Mrs. Meira Kumar first women Lok Sabha Speaker said, “Women have great power hidden within them. Even the Mahatma believed in this and decided to involve them in the freedom struggle... But today we live in a country where rampant female foeticide and female infanticide take place. The condition of women in our country needs attention,

3) Raveena Tandon, an actress who has been associated with numerous NGOs and social activities was in the Pink City recently to promote a campaign aimed at saving the girl child.

4) Hindu religious leaders have decided to launch a crusade against female foeticide in Mathura. Eminent politicians of the BJP and the Sangh Parivar, social workers and poets are expected to attend the inaugural function scheduled for tomorrow at the Vatsalya Gram Vrindavan here, Sadhvi Ritambhara, the chief architect of the crusade. “Female foeticide is a crime and it has nothing to do with the Hindu religion. The crusade against it would start on December 16, 2008 with the congregation of saints, Shankaracharyas and social workers. Eminent politicians have also been invited for the occasion,” Ritambhara said. She claimed consents of eminent sadhus have been taken for the programmes which will be conducted as part of the crusade. “Since female foeticide adversely affects the psyche of the woman on whom the abortion is conducted, the sooner the evil is buried, the better it would be,” she added.

AUTHORS’ VIEWS ON FEMALE FOETICIDES

Our views on status of foetal life may be comprehended in a different manner.

Female foetus is a living organism. The word ‘Live’ is the same category of the word ‘life’. In our society the person who is living has a right to life. Since foetus is a living organism, it has also a right to life. If a person kills a life, it should be treated as a murder. So, killer of female foetus should be treated as a murderer in the same way. On the emotional purview, foetus is a helpless entity who can’t express its volition and desire. We have a significant extent of men, be it physically handicapped or forcibly suppressed in society, who also can’t express their desire and demand. So if a foetus is killed on account of its lack of volition, these disabled persons may also be killed in same theory.

Consequences of female foeticide in India

Female foeticide has a serious impact on the society, in the overall growth and development of the country. Let us discuss below the effects of female foeticide in India:

Skewed sex ratio: According to 2011 census, the child sex ratio in India was 919 females to 1000 males, which declined from 927 females to 1000 males in the previous decade. Haryana, which is supposed to be one of the richest states in India, takes the top most position in skewed sex ratio. Other prominent states are



Punjab, Delhi, Gujarat, Maharashtra, Himachal Pradesh, Rajasthan, Uttar Pradesh etc. Skewed sex ratios are seen in almost all the states of India, except in North East India and some of South India. Since 1991, more than 80% of districts in India have shown a reducing sex ratio. Going by this, the next census by 2022 will definitely show a further reduction in sex ratios all over the country. It is horrifying to state that illegal foetal sex determination and sex selective abortion have developed into a Rs. 1000 crore industry in India.

Killing a girl child before or after she is born has an adverse effect on the sex ratio and leads to further social evils. Skewed sex ratio, which is the result of female foeticide, has other negative consequences in the society.

Shortage of girls for marriage: "Baljeet Singh, a truck driver of Haryana, gave up hope of finding a girl for his marriage from his state Haryana. He was 30. He then got married to a young girl, half of his age, from a Muslim community in Assam"

In a recent report by the Red Cross Society, there is a large number of bachelors who have crossed the marriageable age in Punjab and Haryana because of shortage of girls.

Eligible Jat boys from Haryana are seeking brides from areas which are far away from their home town, like Kerala, to change their "single" status to "married".

These are just a few instances. With fewer women, it is interesting to notice the "Indian marriage market". Men are willing to pay a large amount of money to get married to a girl from other states like Jharkhand, Bihar, West Bengal, or Madhya Pradesh. The outcome is that while the parents of the girls benefit, the girls themselves have to compromise their culture, dress, language and food habits.

Trafficking and prostitution: Girls are kidnapped or stolen. They are sold and resold at varied prices. Eventually, they end up being prostitutes.

Increasing number of child marriages: Many women from poverty zones or poverty-stricken families get married before 18 years in order to survive and prevent being a burden to the family. The number of child marriage is increasing. Girls get married to men double their age. They are forced to get married to old men.

Increasing maternal deaths and ill-health of women: Killing of a foetus in the womb or abortion weakens the health of a woman. In some cases, the women have to undergo many abortions till they conceive a male child. The outcome is that there is an increasing number of maternal deaths. Women undergoing abortions are also more prone to infections and sickness.

Increase in polyandry: Munni, a young woman came, to Baghat village, UP as a young bride, years ago. She was then forced to have sex with her two unmarried brothers-in-law and bear children from them as well. Today she is the mother of 3 sons from her husband and his brothers. Munni is still "unhappily married" but she has not filed any complaint.

There are many such incidents happening in India. In most villages in India where female foeticide is practiced, one wife lives with many unmarried brothers.

Conclusion

Ironically, female foeticide takes place in a country where people worship various forms of Goddesses, and where females are considered as *Maa Laxmi*'s incarnation and where young girls are worshipped and people touch their feet for blessings. But even then, the intentional killing of the girl child continues. Such is the



double standards of our society. Right to education, health and empowerment are the fundamental rights of every Indian woman. The horrible illegal practice of female foeticide has to be stopped by harsh laws and change in the mind-set of the people. **Save the girl child for a better tomorrow!!!**

Conclusion

The ineffective implementation of the legislation is evident in India's skewed gender ratio. If it is possible to stop abortion and foeticide of female by legal enforcements on the demand and supply sides, female infants will see the light and breathe the air of the earth. Even if there is no direct female infanticides, indirect infanticides must occur until and unless our conceptions regarding various economic, social, and ritual reasons about the girls are changed. Guru Nanak

asserted that women were not at all inferior to men: "From the woman is our birth, in the woman's womb are we shaped; To the woman we are engaged, to the woman we are wedded; The woman is our friend and from the woman is the family;

If one woman dies, we seek another, through the woman are the bonds of the world; Why call woman evil who gives birth to kings? From the woman comes the woman, without woman there is none; O Nanak, God alone is the one Who is independent of the woman (because He is unborn)."

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