

International Conference on Women Health



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Evidence of decreasing prenatal sex-selection practice in a context of liberal abortion rights

Abstract:

Son preference and prenatal sex-selection against females (PSS) among British Asian communities, raised considerable media attention, leading to parliamentary debates on abortion laws in Britain in 2015. PSS among India-born mothers in the 1990s was indirectly evidenced in past UK study by analysing sex-ratio at birth. However, we lack reliable quantitative evidence to document the practice in Britain since 2005 and regulations remained unchanged, offering a unique opportunity to test the need (or not) for abortion regulation to curtail PSS practice. Using annual sex ratio at birth counts from 1969 to 2018 and applying novel indicators, I found that sex-selection prevalence among India-born mothers is reduced in recent years, from its peak at about 4% in the 1990-2005 period. This decline is independent of specific legislation on sex-selective abortion and suggests a weakening of son preference. A reduction in prenatal sex-selection prevalence in Britain, shows that curbing the practice does not request stricter (sex-selection) abortion law. The findings support policy approaches addressing root-causes of gender preference to reduce PSS, while preserving current abortion rights.

Keywords: Prenatal sex-selection; Reproductive health policy; Sex-ratio at birth; Gender; Son preference.

Biography: Sylvie Dubuc is professor of population Studies with a strong interest in fertility, gender, migration and reproductive Health and Rights. After 20 years of research and academic career in the UK, Sylvie has joined the University of Strasbourg to take a professorial chair. Bringing an interdisciplinary approach to population research. Sylvie is co-lead of the axis 3 of the lab SAGE, on population and territorial dynamics. She has worked extensively on prenatal sex-selection (from quantitative analysis, to ethical and policy issues). Her current research investigates socio-spatial inequalities, notably gender and maternal health inequalities in an intersectional perspective in India.