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LETTERS

Prenatal sex and race determination is a slippery slope

I am deeply worried about your guest editorial,¹ please allow me a few bullet points:

- Trying to dispel some of the counter-arguments to sex selection, your argument of prospective parents' autonomy is void. If anyone has a right to determine his or her sex, it would be the person concerned, in this case the unborn child. Granted, hereditary sex related disease may force us to make tough choices; but surely the parents will not have surrogate decision making power in the absence of such a dire dichotomy. Would the child be able to sue the parents for making a bad choice?
- The threat of neglect or abuse a girl might face, should her "deselection" not be permitted, amounts to hostage taking of the unborn life. The same applies also to the burden a family or society may put on a woman, by forcing her into multiple pregnancies, until she delivers the desperately wanted son! What is more, the fact that a law might be ignored or disregarded, has rarely been an accepted argument for its repeal.
- In fact, should pro-male sex selection become widespread in an already sexist society, this would most likely be a prerogative for the affluent and resourceful, reinforcing the existing inequality. Say—for example, that predominantly male children would be born to privileged parents; the parents would then provide them with more opportunities, leaving the other sex to grow up in even more disadvantaged circumstances.
- The slippery slope becomes most obvious, however, if we imagine racially discordant

couples wanting to determine their offspring's race and colour, be it based on (justified?) fears about societal abuse, neglect, and disadvantage, or their wish to "balance their families", or even only as a matter of taste...

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Prenatal sex and race determination is a slippery slope: author's reply

It may be most convenient to respond to Dr Andreae's points in turn.

- Unless the claim that a child should determine its own genetic characteristics before it is conceived or born is intended to be flippant, it is logically incoherent. Conception is a decision that only a prospective parent can make. The editorial argument is that denial of choice of sex contributes to preventable maternal mortality and morbidity, particularly in developing countries. None of Dr Andreae's concerns addresses the ethics of tolerating the estimated daily toll of 1400 women, an estimated 515 000 women each year, who die of pregnancy related causes, over 99% of whom are in developing countries of the world.¹ Many deaths are due to pregnancies that come too soon, too late, too often, and too closely spaced in women's reproductive lives because of pressure to deliver sons.
- The second point acknowledges that women's lives are currently held hostage

to multiple pregnancies to produce sons. Opposition to legal reform to relieve this burden tolerates exploitation of women's vulnerability to repressive laws and policies. Ethical analysis in countries committed to justice between women and men increasingly leads to repeal or amendment of laws that repress women's choices. Reformed laws serve to mitigate historic attitudes that treat individual women's reproductive capacities as subject to public manipulation.

- Willingness, reflected in point 2, to maintain women as instruments of state reproductive policies, even for benign purposes, is itself sexist, exploiting existing inequalities that deny women control over their reproductive options. Where son preference prevails, it is increasingly recognised that daughters must also be valued, not least to provide sons with wives and mothers of their children.
- Apart from the inherent unreliability of slippery slope arguments as a basis for ethical public policies, extension of the argument for sex selection after birth of a first child to race is pragmatically unwarranted. There is demonstrable maternal mortality and morbidity where sex selection is denied; there is no evidence of the same related to denial of selection for family balancing on other grounds. Policy indicates that women should not be abandoned to preventable deaths to relieve any imagined speculative or theoretical concerns.

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Reference

- 1 World Health Organization. *Maternal mortality in 1995, estimate developed by WHO, UNICEF, UNFPA*. Geneva: WHO, 2001: 2, 42-7.