The Ethics of Sex-Selection: A View from Britain

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The impulse towards sex selection is nothing new. Throughout human history, couples have attempted to influence the sex of their offspring. In most cases, a prejudice toward boys has produced advice on how to increase the likelihood of a male child while decreasing the chance that the baby will be a girl.

Until recently, those seeking to determine the sex of their child had to rely upon old wives’ tales, anecdotal advice from midwives, and quack medicine. Couples were encouraged to try certain sexual practices and adjust the timing of sex itself in order to produce a boy. Sometimes, as in the case of royal households, this was more than a matter of family preference or convenience.

In the “brave new world” of modern medical technologies, new opportunities for sex selection have emerged. Some of these merely increase the likelihood that a child will be one sex or the other. But new forms of genetic testing, amniocentesis, and prenatal imaging make sex selection fully possible—at virtually any point from conception to birth.

A new report out of Great Britain is sure to insight controversy. Responding to public concern over the issue of baby sex selection, Britain’s Human Fertilisation and Embryology Authority released a report, Sex Election: Options for Regulation, that calls for a ban on sex selection procedures. Nevertheless, the details of this report reveal that this is only a stopgap measure and loopholes are likely to grow over time.

The Human Fertilisation and Embryology Authority conducted a comprehensive study that included an opinion poll of more than 2,000 persons, as well as consultations with focus groups, medical authorities, and religious bodies. In a very real sense, this is an exercise in ethics by questionnaire.

According to The Guardian, one of Britain’s leading newspapers, the HFEA’s decision surprised some observers, who thought there might be a liberal consensus among experts on the issue of parents who have tried many times to have a son to balance the number of daughters in their family, or vice versa. Public outcry against the practice led to the HFEA’s decision to ban sex selection procedures, except in cases of “medical necessity.”

A look at the HFEA’s report indicates that public opposition to the idea of sex selection is rooted in what University of Chicago philosopher Leon Kass calls “the yuck factor.” That is, most of the public respondents seem to think that the idea of sex selection is morally repugnant—even though many are uncertain why this was so.

According to the report, “A great many respondents felt that sex selection was unqualifiedly wrong because it involved interference with divine will or with what they saw as the intrinsically virtuous course of Nature.” As the authors of the report expanded: “In effect they were saying that because human beings are fallible they are not in a position to take into account the full consequences of their actions.”
Others were concerned that sex selection treats children exclusively as a means rather than an end in themselves and interferes with the unconditional love owed by parents to their children.” These respondents felt that a premeditated effort to choose a boy or a girl would compromise the relationship between parent and child and lead to a conditionality in the gift of love.”

Only a minority of respondents claimed that parental choice was a paramount concern and that parents should have an unrestricted right to choose the sex of their offspring.

The HFEA's report effectively bans sex selection procedures in the United Kingdom. Specifically, the Authority banned procedures including sperm sorting and "pre-implantation genetic diagnosis,” or "PGD.” In the case of sperm sorting, the Authority found the procedure to be both unreliable and medically deficient.

The more sophisticated procedure (PGD) involves the identification of the sex of fertilized embryos, allowing only embryos of the desired gender to be placed in the womb. Presumably, the remaining embryos would simply be destroyed—a procedure that is now common in British fertility clinics and mandated by law.

The report includes a summary of responses from churches and religious groups. The Church of England Public Affairs Unit rejected the argument that sex selection is a form of “playing God.” Nevertheless, the Church of England opposed sex selection “citing the level of risk, both physical and psychological, and the potential social harms as reasons.” The Catholic Bishops’ Conference presented a far more powerful argument, warning that sperm sorting is “one step in an act of manufacture of a child.” Following traditional Catholic moral reasoning, the church advised that natural methods that might increase the likelihood of having a boy or a girl were acceptable, whereas, all artificial means were rejected as morally deficient.

In the end, the HFEA decided to ban sex-selection procedures because of the force of public opinion. The group found “very widespread hostility to the use of sex selection for non-medical reasons.” As the Authority stated: “In our view the likely benefits of permitting sex selection for non-medical reasons in the UK are at best debatable and certainly not great enough to sustain a policy to which the great majority of the public are strongly opposed.”

This report, though limited in effect to the United Kingdom, offers a warning to all of us. First, the report deals only with procedures that take place prior to the implantation of a fertilized embryo in the womb. Sex selection abortions, based on a prenatal identification of gender, are common and easily available. In both the United Kingdom and the United States, sex selection abortions are now so common that many obstetricians shudder when women demand tests to determine the sex of their unborn child. In all too many cases, these patients are never seen again. There are no reliable statistics indicating how many abortions performed each year are simply for the purpose of sex selection, but evidence suggests that these abortions are more common than we would like to think.

Second, we should note that the British report is not based primarily in moral reasoning, but in public opinion. The HFEA's decision to ban sex selection procedures was based in public opposition, not in a comprehensive moral analysis. The report states plainly that the ban is put in place because the social benefits do not outweigh the force of public opposition—at least not yet. Presumably, once public opposition is alleviated, the "social benefits" of sex selection procedures would then demand their acceptance and legalization.

Third, the ban on sex selection procedures includes a medical exemption. Sex selection procedures, including pre-implantation analysis of fertilized embryos, are fully allowable given certain medical considerations. Specifically, the procedure is to be allowed when genetic testing indicates the presence of gender-specific genetic disease in a family’s history. The report cites the need for “clear and overriding medical justification” to be presented in the case of genetic disease. Implicit in the report is an affirmation that fertilized embryos, once discovered to be carriers of these genetic diseases, are to be destroyed.

Fourth, the HFEA ventured out of the specific area of sex selection considerations and raised the question of disabled children. Hauntingly, the authority decided that “the informed choices of individual parents to make use of assisted reproductive technologies in order to avoid having a disabled child” are morally defensible. As the report stated: “The choice of parents not to have a disabled child does not, in our view, entail the eugenic proposition that it is undesirable to have disabled people in society.” We expect that kind of moral reasoning to have come right out of Nazi, Germany, not
the United Kingdom. What stretch of moral imagination would claim that the decision of parents to destroy an embryo –revealed to carry genetic defects– is anything other than eugenics?

As The Guardian covered the story, the paper advised parents seeking these sex selection procedures to “head for the United States where sex selection is practiced.” Embarrassingly enough, this advice is accurate. The tragic reality is that this British report, severely compromised as it is, imposes limitations in Great Britain that go beyond anything limiting sex selection procedures in the United States.

This British report is full of holes, moral compromises, and lacks any sustained moral argument. Inevitably, the ban will fall once public opposition to sex selection procedures subsides. The release of this report should awaken the Christian conscience in both the United States and the United Kingdom. Christians are sleeping through history as new medical technologies threaten the very meaning of human life. Read it and weep.