

Men's Perspectives on Son Preference and Gender-Biased Sex Selection: A Formative Study Conducted in Two Districts of Lumbini Province, Nepal

Husbands play decisive roles in contraceptive use decisions and the number of sons and daughters to be given birth to, by their spouse. Studies have shown that women who were unable to bear sons were subjected to different forms of physical and psychological pressures including disgrace and stigmatization (by calling her names for inability to give birth to a son) and fall under immense threats from their in-laws and husband to bringing in a second wife if they do not beget a male child for continuing the family legacy (UNFPA/CREHPA 2007, 2019).

The study was conducted in two districts of Lumbini Province, Nepal, to understand the underlying causes of son preference and the practice of gender-biased sex selection (GBSS) from a men's perspective. It examined their views on the value of daughters, the psycho-social pressure they face to beget a son and the coping mechanisms they adopt to mitigate such pressure. The study also aimed to understand men's perspective on long-term implications of sex ratio imbalance due to the growing practice of GBSS in the country.

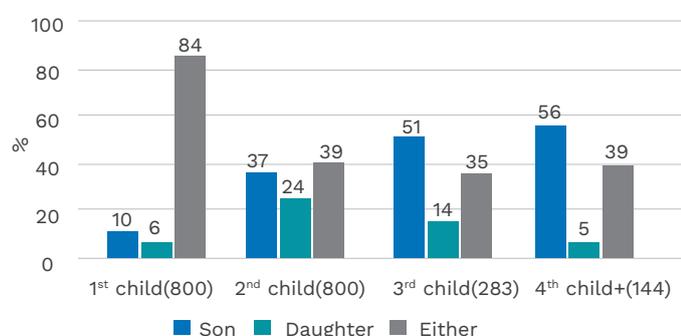
Gender-Biased Sex Selection (GBSS) is a method used by couples and families to make decisions on pregnancy outcomes based on sex composition of existing children or for desired sex composition aided by prenatal testing to determine the sex of the fetus to ensure birth of desired sex, which is predominantly male.

GBSS may occur both pre-natal and post-natal. Prenatal GBSS occurs prior to or during conception by selecting sex during fertilization, or through termination of pregnancy when the fetus is determined to be of female sex. Postnatal sex selection (generally up to 5 years of age) as a result of neglect, differential treatment in maternal nutrition and child care, as well as infanticide.

KEY FINDINGS

1 MEN'S DESIRE FOR A SON INCREASED FROM THE SECOND BIRTH ORDER

The study found that most married men (84%) have no sex preference at birth of their first child. Preference for a son begins from the second birth order (37%) and peaks during the third (51%) or the fourth and subsequent birth order (56%) (Figure 1). Among the married men who expressed their desire to have an additional child in the future, the proportion of those desiring a son was more than three times (59%) higher than those preferring a daughter (17%).

FIGURE 1: Sex preference of child at each successive birth order (N=800)

Assessment of differentials in son preference among men according to age, caste/ethnicity and education levels showed that younger men aged 18-24 years are 1.25 times more likely to prefer a son at second birth order as compared to men aged 25-29 years (reference category). Likewise, as compared to Muslim men (reference category), son preference at the second birth order is higher among those belonging to the

Terai/Madhesei castes (1.53 times), Janajati (1.49 times), Brahmin/Chhetri (1.46 times) and Dalits (1.29 times). Statistically significant differentials in son preference between men with higher secondary and above education levels (reference category) and those with lower educational levels at the second birth order was evident (1.35 to 1.45 times) ($p=0.05$) (Table 1).

Similar to the findings at the second birth order, at the third birth order, preference for a son among Janajati men (1.98 times), Madhesi caste groups (1.88 times) and hill Brahmin/Chhetri (1.86 times) was nearly twice higher than among Muslim men. Similarly, son preference when examined by education level indicated a negative correlation when compared to the reference category (higher secondary and above education) at third birth order. For instance, those men who have attained lower secondary education are 1.69 times more likely to have son preference than the reference category and this relationship is statistically significant ($p=0.05$) (Table 2).

TABLE 1: Differentials in son preference from the second birth order among men by their selected background characteristics (N=800)

Background characteristics	Son Preference	Total N	Risk ratio	Relative Risk (RR)	Confidence Interval (CI)	
					Upper	Lower
Age group						
18-24	14	32	43.75	1.25	1.69	0.82
25-29‡	71	203	34.98	1.00	Ref	Ref
30-34	98	280	35.00	1.00	1.25	0.75
35+	110	285	38.60	1.10	1.34	0.87
Caste/Ethnicity						
Brahmin/Chhetri	88	235	37.45	1.46	2.02	0.90
Janajati	75	196	38.27	1.49	2.06	0.93
Terai/Madhesei Other Castes	69	176	39.20	1.53	2.09	0.96
Dalits	51	154	33.12	1.29	1.87	0.71
Muslim‡	10	39	25.64	1.00	Ref	Ref
Level of education						
No education/non-formal education	16	44	36.36	1.33	1.81	0.84
Primary	62	167	37.13	1.35*	1.70	1.01
Lower Secondary	79	208	37.98	1.39*	1.72	1.05
Secondary	102	257	39.69	1.45*	1.77	1.12
Higher secondary and above‡	34	124	27.42	1.00	Ref	Ref

Notes: ‡ Indicated reference category. * Indicates 95% CI ($p=0.05$)

TABLE 2: Differentials in son preference from the third birth order among men by their selected background characteristics (N=283)

Background characteristics	Son Preference	Total N	Risk ratio	Relative risk	CI Upper	CI Lower
Age group						
18-29	24	48	50.00	1.01	1.37	0.66
30-34‡	43	87	49.43	1.00	Ref	Ref
35+	76	148	51.35	1.04	1.30	0.77
Caste/Ethnicity						
Brahmin/Chhetri	33	62	53.23	1.86*	2.58	1.15
Janajati	30	53	56.60	1.98*	2.70	1.26
Terai/Madhesei Other Castes	45	84	53.57	1.88*	2.58	1.17
Dalits	29	63	46.03	1.61	2.34	0.88
Muslim‡	6	21	28.57	1.00	Ref	Ref
Level of education						
No education/non-formal education	14	26	53.85	1.39	1.96	0.82
Primary	36	83	43.37	1.12	1.63	0.61
Lower Secondary	49	75	65.33	1.69*	2.16	1.22
Secondary	32	68	47.06	1.22	1.73	0.71
Higher secondary and above‡	12	31	38.71	1.00	Ref	Ref
None/non-formal education	39	80	48.75	1.07	1.47	0.68
Primary	34	74	45.95	1.01	1.42	0.60
Lower Secondary	40	66	60.61	1.33	1.71	0.96
Secondary‡	20	44	45.45	1.00	Ref	Ref
Higher Secondary and above	10	19	52.63	1.16	1.69	0.62

Notes: ‡ Indicated reference category. * Indicates 95% CI (p=0.05)

2 PATRIARCHAL ATTITUDES AND BELIEFS AMONG MEN

As part of the research, statements reflecting the prevalence of patriarchal attitudes uphold son preference and GBSS among men were asked to the participants of the study. The majority of men in both Arghakhanchi (58%) and Rupandehi district (73%) agreed to the importance of a son to carry forward the family lineage. In comparison to the men in Arghakhanchi (34%), a larger proportion of men in Rupandehi (49%) agreed that a son is necessary to take care of the parents in their old age. Moreover, men from rural municipalities in Rupandehi (61%) believed

that it was not possible to perform last rites and rituals without a son and one in five of them (21%) agreed that having a son is a sign of masculinity. However, almost all men in both the districts disagreed with the statements that “a man can remarry if he does not have a son from his first wife” (90% for Rupandehi and 97% for Arghakhanchi) and that it is acceptable to terminate a fetus determined as female sex if the couple already has two daughters (87% for Rupandehi and 89% for Arghakhanchi) or to terminate a fetus of male sex if the couple already has two sons (89% each). No marked differences in perceptions are observed in terms of age, education and ethnicity of the married men (Table 3).

TABLE 3: Attitudes towards the value of sons among men (N=800)

	Arghakhanchi (%)	Rupandehi (%)	Total (N)
Birth of a son is important to carry forward the family lineage.			
Agree	58.0	73.0	524
Somewhat agree	13.3	11.3	98
Disagree	28.8	15.8	178
Birth of a son is important to take care of parents during their old age.			
Agree	34.0	48.8	331
Somewhat agree	18.8	18.0	147
Disagree	47.3	33.3	322
It is not possible to perform last rites and rituals without a son.			
Agree	23.0	48.8	287
Somewhat agree	17.3	18.0	141
Disagree	59.8	33.3	372
If a man does not have a son, he has good reason to remarry.			
Agree	0.8	6.0	27
Somewhat agree	2.3	4.0	25
Disagree	97.0	90.0	748
It is okay for a couple to identify the sex of a fetus and abort a fetus determined as female sex if they already have two daughters.			
Agree	5.5	9.0	58
Somewhat agree	5.3	3.8	36
Disagree	89.3	87.3	706
It is okay for a couple to identify the sex of a fetus and abort a fetus of male sex if they already have two sons.			
Agree	5.5	8.5	56
Somewhat agree	5.3	2.8	32
Disagree	89.3	88.8	712
Having a son shows that you are a real man.			
Agree	9.8	14.0	95
Somewhat agree	10.3	10.8	84
Disagree	80.0	75.3	621

3 MEN'S ATTITUDES ON PRE-NATAL SEX SELECTION AND GBSS

The study also measured men's attitudes towards pre-natal sex determination (PNSD) and GBSS by assessing their perceptions/views using six statements. Almost half of the men disagreed with the statements that a couple can easily access technologies to determine the sex of the fetus (49%) with wide-ranging district-wise difference in disagreement on this statement (35% in Arghakhanchi vs 59% in Rupandehi). The large majority of the men in both the districts (70% in Arghakhanchi vs 73% in Rupandehi) also disagreed with the

statement that men usually persuade their wives to undergo USG, and that many health service providers reveal the sex of the fetus (63% Arghakhanchi vs 72% in Rupandehi). Fewer men in Arghakhanchi (16%) and about a quarter in Rupandehi (23%) agreed that nobody is ever punished for getting information on the sex of the fetus. However, nearly half of the men (60% in Arghakhanchi and 46% in Rupandehi) agreed that doctors request excessive fees to disclose the sex of a fetus. Only about a third of the men in Arghakhanchi (35%) and a quarter in Rupandehi (25%) agreed that a couple can easily seek GBSS services if they want to (Table 4).

TABLE 4: Attitudes towards pre-natal sex determination and gender-biased sex selection among men (N= 800)

	Arghakhanchi (%)	Rupandehi(%)	Total %
A couple can easily access technologies to determine the sex of the fetus.			
Agree	43.5%	27.0	35.2
Somewhat agree	17.3	14.0	15.6
Disagree	39.3	59.0	49.1
Men usually persuade their wives to undergo ultrasound testing.			
Agree	7.0	15.5	11.3
Somewhat agree	17.5	14.8	16.1
Disagree	75.5	69.8	72.6
Many health service providers reveal the sex of the fetus to their clients.			
Agree	11.8	11.0	11.4
Somewhat agree	25.0	17.0	21.0
Disagree	63.3	72.0	67.6
Nobody is ever punished for getting information on the sex of the fetus.			
Agree	16.3	22.8	19.4
Somewhat agree	10.3	15.3	12.8
Disagree	73.5	62.0	67.8
Doctors charge a lot of money to disclose the sex of the fetus.			
Agree	59.8	46.0	52.9
Somewhat agree	21.0	23.8	22.4
Disagree	19.3	30.3	24.7
A couple can easily seek GBSS services if they want to.			
Agree	35.0	24.5	29.7
Somewhat agree	18.0	13.8	15.9
Disagree	47.0	61.8	54.4

4 HUMILIATION FACED BY MEN FOR NOT HAVING A SON

The study found that men without sons are under immense socio-psychological pressure. They feel inferior to and humiliated by men with sons and are also teased for having only daughters.

5 MEN'S PERCEPTIONS ON THE LONG-TERM SOCIAL IMPLICATIONS OF IMBALANCED SEX RATIO AT BIRTH

Around nine in ten men from Arghakhanchi (91%) and Rupandehi (89%) believe that imbalanced sex ratios could lead to increase in violence against women and girls. They also believe that due to imbalanced sex ratios, there would be a lack of women available for marriage (92% in



Being the only son, my family members pressurize me to father a son to carry forward our family lineage. Moreover, people in our community look down upon those who do not have a son and call them names such as "namard" (impotent). This is another reason why I must have a son in order to gain respect and status in the community. Likewise, the community will humiliate my wife for not bearing a son.

- 25 YEARS, ARGHAKHANCHI



Arghakhanchi and 94% in Rupandehi). In addition, the men agreed with the statement that men may have to pay a bride price and, as a result, many poor men may remain single due to their inability to pay such a price (88% in Arghakhanchi and 93% in Rupandehi). No marked differences in perceptions are observed in terms of age, education and ethnicity of the married men.

CONCLUSION

As husbands, men play a crucial role in the decision-making on the use of contraception, number of children, and continuation of the practice of GBSS. Due to deeply embedded social norms that ascribe higher values to sons in life and post life, the social custom of dowry, and masculine stereotypes, men face strong socio-psychological pressures to father at least one son. Men without sons are subjected to humiliation and stigmatization in their families and communities. They also fear being perceived as impotent. The study also reveals that the sex composition of the surviving children influences sex preference of the current pregnancy. Men with only daughters face significant pressure to father a son during the subsequent birth order, leading them to persuade their wife to undergo PNSD tests and terminate fetus of undesired sex. Nevertheless, almost all men are aware about the long-term implications of an imbalanced sex ratio in society such as a “surplus” of boys reaching the age of marriage, a rise in violence against women and girls.

RECOMMENDATIONS

- ◆ Sensitize local government officials, community-based stakeholders, religious leaders and faith-based organizations on the equal value of daughters and sons in the society and the implications of GBSS, including the imbalance of SRB. They play an important role in addressing stigmatization of couples with daughters and in preventing GBSS.

- ◆ Ensure participation of local government officials and community-based stakeholders in the development of context-specific social and behavior change communication campaigns to promote gender equality and the value of the girl child, address the practice of GBSS and create awareness on the long-term consequences of an imbalanced SRB in society.
- ◆ In their roles as husbands and fathers, mobilize men as agents of change to transform harmful socio-cultural norms and practices that support son preference, GBSS and gender discrimination more broadly.
- ◆ Advocate with government at all levels to introduce couple counseling in all antenatal care facilities with the objective to educate expectant couples on the equal value of sons and daughters. Introduce mandatory couple counseling for couples with at least one surviving child.
- ◆ Introduce/strengthen effective and sustainable economic empowerment programmes for women and adolescent girls at all levels, including training on entrepreneurial skills and the provision of financial assistance/loans to enable them to start their own businesses or pursue the profession of their choice.

STUDY DESIGN

The study adopted a mixed-method design that consisted of a household survey (quantitative) and in-depth interviews (qualitative). Data was collected from 800 married men with at least two surviving children (youngest child aged 0–5 years) in two districts (Arghakhanchi and Rupandehi) of Lumbini Province from two different ecological zones (hills and terai) having very high sex ratio imbalance at birth. Using a multi-stage cluster sampling technique, men from an urban and a rural municipality of Arghakhanchi (hill district) and Rupandehi (terai district) were selected for the survey. Of the 800 men who participated in the survey, the study selected 23 for in-depth interviews with three criteria: 1) men who have only daughters; 2) men with a pregnant spouse and who was persuaded to undergo a pre-natal sex determination test due to their desire for a son; and 3) men whose spouse terminated fetus of undesired sex in the past five years. Data collection for this study was carried out in person between May and August 2021.